IDAHO



CLICK, ZIP. FAST ROUND TRIP.

Handbook for
Electronic Filers of
Individual Income Tax Returns

Tax Year 1999

STC-ELF-01 09/99



Dear Software Developers,

Enclosed is the 1999 record layout for Electronic filing and the Individual income tax instructions.

Idaho implemented additional forms this year that can be part of the electronic record, Forms 49R, 56, 75, and 75 IMV.

LEGISLATIVE CHANGES

Married Taxpayers Filing Jointly

Effective January 1, 1999, the standard deduction is increased by an additional \$150 for married taxpayers filing jointly.

Credit for Contributions to Educational Entities Amended

Effective July 1, 1999, the statute allowing a credit for contributions to educational entities now specifically allows donations to an Idaho university-related research park to qualify for the credit.

Credit for Contributions to Youth and Rehabilitation Facilities Expanded

Donations made on or after January 1, 1999, to the Hope House, Inc. or its foundation will qualify for the credit for contributions to youth and rehabilitation facilities.

Promoter-Sponsored Event Credit

Effective July 1, 1999, an event sponsor or promoter who is appointed to issue temporary sales tax permits is allowed a \$1 credit for each temporary permit he issues during the tax year. To qualify for the credit, the promoter or sponsor must have filed Form ST-124 with the Tax Commission.

Medical Savings Account

Starting January 1, 1999, if the medical savings account transfers to the surviving spouse as the beneficiary, it is treated as if the account belonged to the surviving spouse. The money stays in the account and the spouse can use it to pay his or her medical expenses as well as those of any dependents.

However, if the account transfers to someone other than a surviving spouse, it ceases to qualify as a Medical Savings Account. The person who inherits the account may use it to pay the medical expenses of the deceased person. These expenses must be paid within a year of death. The remaining amount is taxable income to the recipient.

FORM CHANGES

Medical Savings Account Interest

The deduction for interest earned on Idaho medical savings accounts has been moved from Form 39 to Form 40, line 26 and Form 43, line 41.

Idaho Resident-Military Pay

Idaho resident active duty military pay earned outside of Idaho has been moved from Form 39, to Form 43, line 40.

Adoption Expenses

The deduction for adoption expenses has been moved from Form 43 to form 39, Part II, Section A, line 1.

PTIN

The Personal Taxpayer Identification Number (PTIN) is acceptable in place of the Social Security Number (SSN).

E-MAIL

Please let us know what your e-mail address is. It will help in communicating.

IDAHO ELECTRONIC FILING SPECIFICATIONS VERSION 99.09.09 TABLE OF CONTENTS

INT	RODUCTION		3
CON	NTACT PERSO	ON	3
FILI	NG CRITERL	A	4
ACK	NOWLEDGM	ENT OF IDAHO ELECTRONIC RETURN	5
> H		MITTERS SIGN UP FOR THE IDAHO EDGMENT SYSTEM	5
RES	OLUTION PR NON-RECEI	ROCESS PT OF IDAHO ACKNOWLEDGMENT RECORD	6
TES	TING PROCE	DURES	7
GEN	NERIC AND U	NFORMATTED RECORD	7-8
CHA	RACTER SET	TS - ALLOWABLE ENTRIES	9 -10
GEN	VERIC RECO	RD LAYOUT FOR FORM 40	11
EDI	TS AND CROS	SS CHECKS FOR IDAHO FORM 40	22
TAX	RATE SCHE	DULE FOR FORM 40	24
GEN	VERIC RECO	RD LAYOUT FOR FORM 43	25
EDI	TS AND CROS	SS CHECKS FOR IDAHO FORM 43	38
TAX	RATE SCHE	DULE FOR FORM 43	39
UNF	FORMATTED	RECORDS	40
	FORM 49	IDAHO INVESTMENT TAX CREDIT	40
	FORM 49-C	SCHEDULE OF CREDIT CARRYOVER	43
	FORM CG	IDAHO CAPITAL GAINS DEDUCTION	47
*	FORM 56	IDAHO INDIVIDUAL NET OPERATING LOSS COMPUTATION.	51
*	FORM 49R	RECAPTURE OF IDAHO INVESTMENT TAX CREDIT	56

*	FORM 75 ID	OAHO FUELS USE REPORT	60
*	FORM 75-IMV	IDAHO FUELS TAX REFUND WORKSHEET	63
ATT	ACHMENTS:		
	B - ACKNOWLE C - INSTRUCTION D - IDAHO PAY E - StAck TRANS	LARATION FORM (ID-8453) EDGMENT FOR RECORD LAYOUT ONS FOR PERMANENT BUILDING FUND MENT VOUCHER (ID-8490) SMITTER PROFILE FORM L INCOME TAX INSTRUCTIONS	

* NEW FORMS ADDED THIS YEAR

INTRODUCTION

This publication outlines the communication procedures, transmission formats, character sets, validation criteria and reject codes for filing individual income tax returns as part of the Federal State Electronic Filing program between the Internal Revenue Service (IRS) and the State of Idaho.

The material in this publication will provide software developers the necessary information for capturing and formatting Idaho income tax data and the associated federal information required as part of an Idaho return.

This publication does NOT replace the requirements, procedures, etc., issued by the IRS. All IRS requirements must be adhered to in developing the Idaho return. See IRS Publication 1346. Electronic Return File Specifications and Record Layouts for Individual Income Tax Returns and Publication 1345. Handbook for Electronic Filers of Individual Income Tax Returns.

The *Idaho Electronic Filer Handbook* provides filers and transmitters with the procedural aspects of filing an Idaho return jointly with the taxpayers federal return.

CONTACT PERSONNEL

Coordinator - Dawn Glazier	208-334-7822
dglazier@tax.state.id.us	208-334-7650 (FAX)
Technical Assistance - Steve Thimsen	208-334-7569
sthimsen@tax.state.id.us	208-334-4625 (FAX)
Testing Problems - Robin Allen	208-334-7783
rallen@tax.state.id.us	208-334-7650 (FAX)

WHO CAN FILE ELECTRONICALLY

Idaho will allow returns to be filed electronically if they meet the criteria set by the IRS and the State of Idaho. The following is a list of returns acceptable for electronic filing.

- 1. Form 40 & 43
- 2. Schedule 39, CG, 49, 49C, 49R, 56, 75 & 75IMV
- 3. Refund Returns, Balance Due Returns & Direct Deposit

EXCLUSIONS FROM IDAHO ELECTRONIC FILING

For Tax Year 1999, there are some restrictions for filing an Idaho electronic return. These are as follows:

- 1. Non-calendar year filers
- 2. Prior Year Returns
- 3. Amended or Corrected Returns
- 4. Married filing separate returns.
- 5. Returns for Deceased Taxpayers or Spouse.
- 6. Returns claiming credit for taxes paid to other states
- > NOTE: These are over and above the IRS restrictions listed in Publication 1345.

ACKNOWLEDGMENT OF IDAHO ELECTRONIC RETURN

PURPOSE OF IDAHO ACKNOWLEDGMENT

The Idaho Acknowledgment system is designed to inform transmitters that the Idaho return data has been retrieved and is being processed by the Idaho State Tax Commission. The Idaho Acknowledgment is a separate system from the Federal Acknowledgment.

DESIGN FOR IDAHO ACKNOWLEDGMENT SYSTEM

Depending upon the services provided by each software developer we suggest that developers incorporate the following instructions under either Option 1 or Option 2 as appropriate within their software documentation to their customers.

Option 1 - Customers are required to establish an account with StAck

Since you are required to directly access the centralized state acknowledgment system (StAck) to retrieve your state acknowledgments you are required to register with the new service provider.

> HOW TO REGISTER

You can call the Centralized State Acknowledgment System (StAck) Help Desk at 828-349-5750 to request an application (or you can use the enclosed Centralized State Acknowledgment System (StAck) Transmitter Profile form). Then mail it (or fax it to (828-349-5745).

You may also register with the new service provider through the following: www.state-ack.net

Option 2 - A third-party service provider will retrieve state acknowledgments on their behalf from StAck

Since your state acknowledgments will be retrieved on your behalf you will not be required to register with the new service provider. You should refer to the instructions provided in your software documentation for information on accessing your state acknowledgments.

Under normal processing conditions the Idaho acknowledgment file should be available to a transmitter within two (2) working days of the time he receives the federal acknowledgment from the Internal Revenue Service. Transmitters who transmit for Electronic Return Originators and Prepares must notify them at the time of receipt of the Idaho acknowledgment.

RETURNS RECEIVED AT THE IDAHO STATE TAX COMMISSION

The Acknowledgment Record will inform the Transmitter that the return was received by the State of Idaho. It will not indicate whether any errors were identified.

RESOLUTION PROCESS NON-RECEIPT OF IDAHO ACKNOWLEDGMENT RECORD

In all instances, ensure you have received an IRS Acknowledgment Record and the federal tax return was accepted and contained an Idaho state return prior to contacting the Idaho State Tax Commission.

CONTACT THE IDAHO STATE TAX COMMISSION IF:

- 1. Idaho Acknowledgment Records were received for some returns, but not all returns filed on the same day.
- 2. IRS Acknowledgment Records were received more than two work days ago and no Idaho Acknowledgment records have been received for the same tax returns.
- 3. Acknowledgment records have been received for a Transmission day which follows a day for which no Records were received. (i.e. received acknowledgment records for Wednesday, but not for Tuesday.)

WHO TO CONTACT

To check on the status of an Idaho Acknowledgment Record contact: Idaho State Tax Commission at (208) 334-7783.

Have the following information available when making the call:

Electronic Filer ID Number (EFIN)
Primary SSN
Transmission Date
Date of IRS Acknowledgment Record
Contact Name and Phone Number

IDAHO TESTING

Idaho requires all software developers to test with the Idaho State Tax Commission. State testing begins after successfully completing IRS testing. To facilitate testing, the commission has generated test cases based on the IRS PATS test example. The social security numbers, names and addresses have been altered and Idaho specifics added. The test package will detail the conditions and acceptance procedures. In general, the Idaho State Tax Commission will notify you as soon as possible of acceptance or if problems exist with your test cases. Software Developers must send at least one error free transmission to the Idaho State Tax Commission. Each transmission must contain all test cases.

The preparers are not required to test, however, the Idaho State Tax Commission will accept and process any tests received. Consult the Idaho Electronic Filing Test Package for more information.

GENERIC AND UNFORMATTED RECORD

The IRS defines two record types for state collection of income tax data as part of the Federal State Electronic Filing program. The generic record is a specific formatted record layout which defines each fields characteristics. In the generic record, Idaho captures the state return. The unformatted records consist of nine (9) occurrences, each with 4853 characters (60 lines with 80 characters each).

GENERIC RECORD

Header Section contains identifying information for the return including the Declaration Control Number (DCN) assigned to the return. This is the same DCN assigned to the Federal Return.

State Preparer/Transmitter Section Idaho is utilizing this section of the record for capturing Idaho return preparation information.

Entity Section this section provides name and address information. Idaho requires the exact data in these fields as are stored in the federal return. However, reformatting is required due to field length differences. The IRS character specifications and editing requirements apply to these fields as defined for the federal return.

Consistency Fields the IRS provides based consistency fields and checks. If an entry is significant, it will be compared to the federal return. If it does not match, the returns (both federal and state) will be rejected. The record layout lists the corresponding federal field.

Alphanumeric Fields the generic record provides five (5) fields, each 80 characters in length for states to define additional data fields. The record layout shows (for each field used) how the 80 character field is broken down into individual data fields.

Signed Numeric Money Fields this section contains 116 fields, each 12 characters in length for the storing of money fields. In this section, Idaho captures the Idaho Forms 40, 43, 49, 49C, 49R, 56, 75, 75IMV and CG. For the majority of Idaho returns, these are the parts of the forms used by Idaho taxpayers.

Record Terminus Section the 1-character field with a value of "#" to indicate the end of the generic record.

UNFORMATTED STATE RECORDS

The Unformatted State Records Section will be utilized for the capture of the federal return.

In defining the requirements for the unformatted records, Idaho adheres to the following principles:

- 1. Idaho is requiring the complete federal return.
- 2. Idaho utilizes the federal field number for data defined by the IRS.
- 3. Idaho is storing the data in the same method as the IRS, with the data being preceded by the field number. The Idaho portion of federal data should be identical to the IRS data with the exception of eight characters. The following state record characters should be substituted for the corresponding IRS values.

The characters are: IDAHO

IRS Character	Substitution Characters	ASCII Hex	EBCDIC Hex
***	!!!!	21212121	5A5A5A5A
[{	7B	C0
j	}	7D	D0
#	\$	24	5 B

The federal data may be formatted using the IRS' formatting requirements for variable length records, or the IRS' formatting requirements for fixed length records. A flag (Field name: Federal Data Included Flag) in an alphanumeric field # 300 will indicate the format utilized. The values are:

'V' - Variable Format 'F' - Fixed Format

The IRS Summary Record does not have to be placed in the unformatted state record. If it is included, it will not be edited or processed by the Idaho State Tax Commission.

As Idaho is capturing the federal forms and schedules intact (as formatted for the IRS) there is the chance that not all of the data can be stored in the unformatted records. If storing of the federal data requires more space than available in the (9) unformatted records, the Idaho return is not eligible for electronic filing.

CHARACTER SETS - ALLOWABLE ENTRIES

Idaho follows the IRS requirements for field character specifications. All IRS fields captured for Idaho would be formatted identically to the IRS format.

The following descriptions of fields have been extracted from IRS Publication 1346, Electronic Return File Specifications and Record Layouts for Individual Income Tax Returns (Tax Year 1999).

ALPHA (A) A - Z Upper case alpha characters only

NUMERIC Values 0 - 9, Right-justified, zero-filled

1. Money Fields All money fields are 12 Characters: 11 numeric followed by negative sign (-) if a negative entry. If positive entry the last position would be blank. All money entries are whole dollars (no cents).

Significant (not all zeros) Right justified, zero filled. Non-significant, blank filled. No dollar signs, commas, periods or other non-numeric characters would be inserted into the field.

2. Percentage Fields 5 numeric, left justified, zero-filled. Decimal points entered - assumed to be between the left-most and second left-most position.

Example: 25.32% = 02532, 105% = 10500If less than 100% = preceded with a zero.

EXCEPTION: Ratio 5 numerics, no leading zero. No decimal points entered - assumed to precede left-most position.

Example: 65.987% = 65987

- 3. EIN(Employer ID Numbers) e.g. on Schedules C and F should be blank if there is no number.
- 4. Zip Code Should be left justified. If there are only 5 zip code characters, the 7 remaining digits must be zero filled. If the 3 digit Bar Code Delivery Point is not present, left justify the Zip Code and Zip + 4 and zero fill remainder.
- 5. Other Numerics If present: all numeric, right justified, zero-filled. If not present: ZERO-fill, UNLESS OTHERWISE SPECIFIED IN THE RECORD LAYOUT FOR THAT FIELD.
- 6. Dates M=month. D=day. Y=year. Format will depend on field size (either MMYYYY or MMDDYYYY). If date is not known or covers various dates, enter zeros.

ALPHANUMERICS A - Z (upper case). 0 - 9

State fields which are identical to a corresponding federal field would follow the same usage of special characters as outlined in Publication 1346.

For instance, name and address fields on the Idaho form must be identical to the federal return. The usage of special characters on the Idaho return is limited to what is allowed by the IRS.

ELECTRONIC FILING IDAHO STATE TAX COMMISSION GENERIC RECORD LAYOUT FOR FORM 40

FIELD	IDENTIFICATION	LENGTH	DESCRIPTION
	Byte Count, Page 1	4	"2397" for fixed; "nnnn" for variable format
	Start of Record Sentinel	4	Value "***"
000	Record ID	26	Value "StbbnnnnbbccPG01bsssssssss" (nnnn = Form #"0001") (cc = Form Occur. "01") (sssssssss = Prime SSN)
IRS 010	State Code	2	Value "ID"
IRS 011	City Code	2	NO ENTRY
IRS 020	Declaration Control Number	14	Numeric (same as IRS)
IRS 023	Return Sequence Number	16	Numeric
IRS 024	State-Return-Indicator	1	Numeric
IRS 025	State-Return-Flag	1	Numeric
IRS 030	State-Routing Transit Number	9	Numeric
IRS 035	State-Deposit Account Number	17	Alphanumeric
IRS 040	State-Checking Account	1	Alphanumeric Values "X" or " "
IRS 048	State-Savings Account	1	Alphanumeric Values "X" or " "

IRS 049	Online State Return	1	Alphanumeric Value "O" = Online
IRS 050 IDTC IDTC IDTC IDTC	State Numeric Area .10 Preparer SSN/PTIN .20 Preparer EIN .30 Preparer ZIP .40 Preparer ZIP+4	27 9 9 5 4	Numeric Alphanumeric (byte 01-09) Numeric (byte 10-18) Numeric (byte 19-23) Numeric (byte 24-27)
IRS 052 IDTC IDTC IDTC IDTC IDTC IDTC IDTC	State Alphanumeric Area .10 Mailbox ID .20 Preparer Firm Name .30 Preparer Address .40 Preparer City .50 Preparer State .60 Preparer Self-Empl Ind	93 5 35 30 20 2	Alphanumeric Alphanumeric Alphanumeric Alphanumeric Alphanumeric Numeric Alphanumeric
IRS 055	Spouse SSN	9	Numeric
IRS 060 IDTC IDTC	Name Line 1 .10 Prime Last Name .20 Suffix	35 32 3	Alphanumeric
IRS 065 IDTC IDTC	Name Line 2 .10 Spouse Last Name .20 Suffix	35 32 3	Alphanumeric
IRS 070 IDTC IDTC IDTC IDTC	Name Line 3 .10 Prime First Name .20 Prime Middle Init. .30 Spouse First Name .40 Spouse Middle Init.	35 16 1 16 1	Alphanumeric Alpha (byte 01-16) Alpha (byte 17) Alpha (byte 18-33) Alpha (byte 34) NOT USED (byte 35)
IRS 075 IDTC	Address Line 1 .10 Home Address (no., street)	35 30 5	Alphanumeric Alphanumeric NOT USED
IRS 080	Address Line 2	35	NOT USED

IRS 085 IDTC	City .10 City	22 20 2	Alphanumeric Alphanumeric NOT USED
IRS 090	City Code	5	NO ENTRY
IRS 095	State	2	Alphanumeric
IRS 100 IDTC	Zip Code .10 Zip Code .20 Zip Code Extension .30 Delivery Point Bar Code Loc	12 5 4 3	Numeric Numeric (byte 01-05) Numeric (byte 06-09) Numeric (byte 10-12)
IRS 105	County	20	NO ENTRY
IRS 110	County Code	5	NO ENTRY
IRS 115	Telephone Number	12	Alphanumeric Example: 208-334-7569
IRS 150	Federal Filing Status	1	Numeric Valid Codes 1,2,4,5
IRS 155	Total Federal Exemptions	2	Numeric <i>Note</i> : Valid Range 00-99
IRS 160	Wages, Salaries, Tips	12	Optional Entry
IRS 165	Taxable Interest	12	Optional Entry
IRS 170	Tax Exempt Interest	12	Optional Entry
IRS 175	Dividends	12	Optional Entry
IRS 180	State Refund	12	Optional Entry

IRS 185	Taxable Social Security Benefit	12	Optional Entry
IRS 190	Keogh Plan & SEP Deductions	12	Optional Entry
IRS 195 Line #9	Adjusted Gross Income	12	Numeric
IRS 200	Standard/Itemized Deductions	12	Optional Entry
IRS 205	EIC Claimed	12	Optional Entry
IRS 300	Alphanumeric Field 1	80	
IDTC	.010 Software Developer Code	10	Alpha (byte 01-10)
IDTC	.020 Paid Preparer Name	31	Alpha (byte 11-41) 1040 Seq. 1340
IDTC	.030 Preparer Phone #	10	Alpha (byte 42-51)
IDTC	.040 Non Paid Preparer	13	Alpha (byte 52-64) 1040 Seq. 1330
IDTC	.050 Preparer State EIN	16	Alpha (byte 65-80)
IRS 305	Alphanumeric Field 2	80	
♦ IDTC	.060	3	NO ENTRY
♦ IDTC	.070 Label Box	1	Numeric (byte 4) Values: 0 for No 1 for Yes
IDTC Line #6a	.080 Regular Exemption	1	Numeric (byte 5)
IDTC Line #6b	.090 Children Exemptions	2	Numeric (byte 6-7)
IDTC Line #6c	.100 Other Exemptions	2	Numeric (byte 8-9)
IDTC Line #7	.110 Prime Campaign Fund	1	Numeric (byte 10) Values: 0 for No 1 thru 7 for Yes

IDTC Line #8	.120 Spouse Campaign Fund	1	Numeric (byte 11) Values: 0 for No 1 thru 7 for Yes
IDTC Line #31a	.130 Prime Over 65 Indicator	1	Numeric (byte 12) Values: 0 for No 1 for Yes
IDTC Line #31a	.140 Spouse Over 65 Indicator	1	Numeric (byte 13) Values: 0 for No 1 for Yes
IDTC Line #31b	.150 Prime Blind Indicator	1	Numeric (byte 14) Values: 0 for No 1 for Yes
IDTC Line #31b	.160 Spouse Blind Indicator	1	Numeric (byte 15) Values: 0 for No 1 for Yes
IDTC Line #31c	.170 Claimed Dependent Indicator	1	Numeric (byte 16) Values: 0 for No 1 for Yes
IDTC Line #52	.180 DPA Indicator	1	Numeric (byte 17) Values: 0 for No 1 for Yes
IDTC	.190 Required to File Individual (See Instructions)	1	Numeric (byte 18) Values: 0 for No 1 for Yes
IDTC	.200 Penalty MSA Ind	1	Numeric (byte 19) Values: 0 for No 1 for Yes
♦IDTC Schedule 39	.210 Desc. of Other Subtractions Section C Line #5	30	Alphanumeric (byte 20-49)
IDTC	.220 Form Code	1	Alphanumeric (byte 50) Value: "A" for Form 40
IRS 310	Alphanumeric Field 3	80	
IRS 315	Alphanumeric Field 4	80	
IRS 320	Alphanumeric Field 5	8	

IRS 350	Numeric Field 1 Amount Remitted	12	NO ENTRY
IRS 355 Line #10	Numeric Field 2 NOL Carryforward	12	Numeric
IRS 360 Line #11	Numeric Field 3 Capital Loss Carry Out of Id	12	Numeric
IRS 365 Line #12	Numeric Field 4 Nontaxable Interest and Dividends	12	Numeric
IRS 370 Line #13	Numeric Field 5 Other Additions	12	Numeric
♦IRS 375 Line #15	Numeric Field 6 Idaho NOL Carryforward	12	Numeric
IRS 380 Line #16	Numeric Field 7 St Income Tax Refund From Federal	12	Numeric
IRS 385 Line #17	Numeric Field 8 Interest from U.S. Government obligat	12 ions	Numeric
IRS 390 Line #18	Numeric Field 9 Insulation	12	Numeric
IRS 395 Line #19	Numeric Field 10 Alternative Energy	12	Numeric
IRS 400 Line #20	Numeric Field 11 Child/Dependent Care	12	Numeric
IRS 405 Line #21	Numeric Field 12 Retirement benefits deduction	12	Numeric

IRS 410 Line #22	Numeric Field 13 Social Security Railroad Benefits	12	Numeric
IRS 415 Liner #23	Numeric Field 14 Technological Equipment Donation	12	Numeric
IRS 420 Line #24	Numeric Field 15 Idaho Capital Gains Deduction	12	Numeric
IRS 425 Line #25	Numeric Field 16 Adoption Expenses	12	Numeric
♦IRS 430 Line #26	Numeric Field 17 Idaho Medical Savings Account Contributions and Interest	12	Numeric LIMITATIONS APPLY (\$2,401) Single (\$4,300) Joint
IRS 435 Line #27	Numeric Field 18 Other Subtractions	12	Numeric
IRS 440 Line #29	Numeric Field 19 Total Adjusted Income	12	Numeric
IRS 445 Line #32	Numeric Field 20 Itemized Deductions	12	Numeric
IRS 450 Line #33	Numeric Field 21 State Income Tax in Itemized Deduction	12	Numeric
IRS 455 Line #35	Numeric Field 22 Standard Deduction	12	Numeric
IRS 460 Line #37	Numeric Field 23 Exemptions	12	Numeric
IRS 465 Line #38	Numeric Field 24 Taxable Income	12	Numeric

IRS 470 Line #39	Numeric Field 25 Tax	12	Numeric
IRS 475 Line #40	Numeric Field 26 Tax Paid Other States	12	NO ENTRY
IRS 480 Line #41	Numeric Field 27 Educational Contributions	12	Numeric LIMITATIONS APPLY (20% of the tax on line 39, or \$50 single, \$100 joint)
IRS 485 Line #42a	Numeric Field 28 Investment Tax Credit Earned	12	Numeric
IRS 490 Line #42b	Numeric Field 29 Investment Tax Credit Allowed	12	Numeric
IRS 495 Line #43	Numeric Field 30 Rehabilitation Contrib.	12	Numeric LIMITATIONS APPLY (20% of the tax on line 39, or \$100 single, \$200 joint)
IRS 500 Line #44	Numeric Field 31 Post Consumer Waste Credit	12	Numeric LIMITATIONS APPLY (30,000)
IRS 505 Line #45	Numeric Field 32 Natural Resources Conservation Credit	12	Numeric LIMITATIONS APPLY (2,000)
◆IRS 510 Line #46	Numeric Field 33 Promoter-Sponsored event Credit	12	Numeric
◆IRS 515 Line #49	Numeric Field 34 Special Fuels Tax Due	12	Numeric
IRS 520 Line #50	Numeric Field 35 Sales/Use Tax	12	Numeric

♦IRS 525 Line #51	Numeric Field 36 Tax from Recapture of Investment Tax Credit	12	Numeric
IRS 530 Line #52	Numeric Field 37 Permanent Building Fund (See Instructions)	2	Numeric
IRS 535 Line #53	Numeric Field 38 Total Tax	12	Numeric
IRS 540 Line #54	Numeric Field 39 Nongame Wildlife Conservation Fund	12	Numeric
IRS 545	Numeric Field 40	12	No Entry
IRS 550 Line #55	Numeric Field 41 Children's Trust Fund	12	Numeric
IRS 555 Line #57	Numeric Field 42 Grocery Credit	12	Numeric Line 58=Line 6d X \$15.00
IRS 560 Line #58	Numeric Field 43 Additional Grocery Credit	12	Numeric Line 59 must = Line 31a X \$15.00
IRS 565 Line #59	Numeric Field 44 Old age home credit, or developmentally Disabled	12	Numeric LIMITATIONS APPLY
♦IRS 570 Line #60a	Numeric Field 45 Special Fuels Tax Refund	12	Numeric
♦IRS 575 Line #60b	Numeric Field 46 Gasoline Tax Refund	12	Numeric
IRS 580 Line #61	Numeric Field 47 Idaho Income Tax Withheld	12	Numeric

IRS 585 Line #62	Numeric Field 48 Form 51 Payments	12	Numeric
IRS 590 Line #64	Numeric Field 49 Tax Due	12	Numeric
IRS 595 Line #65a	Numeric Field 50 Penalty	12	Numeric
IRA 600 Line #65b	Numeric Field 51 Interest	12	Numeric
IRS 605 Line #66	Numeric Field 52 Total Due	12	Numeric
IRS 610 Line #67	Numeric Field 53 Overpaid	12	Numeric
IRS 615 Line #68	Numeric Field 54 Amount to be Refunded	12	Numeric
IRS 620 Line #69	Numeric Field 55 Amount to be applied to 2000 taxes	12	Numeric
IRS 625 Sched 39	Numeric Field 56 SECTION B LINE 2 Railroad Retirem	12 nent Benefits	Numeric
IRS 630 Sched 39	Numeric Field 57 SECTION B LINE 3 Social Security I	12 Retirement Be	Numeric nefits
IRS 635 Sched 39	Numeric Field 58 SECTION B LINE 5 Retirement Ann	12 uity included in	Numeric n Federal
IRS 640 Sched 39	Numeric Field 59 SECTION B LINE 6 Smaller of line 4	12 or 5	Numeric
IRS 645	Numeric Field 60	12	NO ENTRY

IRS 650	Numeric Field 61	12	NO ENTRY
IRS 655	Numeric Field 62	12	NO ENTRY
IRS 660 Sched 39	Numeric Field 63 SECTION C LINE 1 Maintaining Ho	12 ome for Aged	Numeric
	Numeric Field 64 SECTION C LINE 2 Idaho Lottery W	12 Vinnings	Numeric
	Numeric Field 65 SECTION C LINE 3 Income Earned	12 on Reservation	Numeric 1
	Numeric Field 66 SECTION C LINE 4 Other Subtracti	12 ons	Numeric

IRS FIELDS 680 Through 925 are omitted, as there are no entry fields on this form.

IDAHO INDIVIDUAL INCOME TAX RETURN

	-30-99												
											• A	RF	W M
							100	9, ending			<u> </u>	2	000
For th	e year	January 1 - December 31, 1999, or fiscal year be	ginning	nar	me		_, 133	o, enan		Your S	ocial Secur		
		Your first name and initial			ne	30.1	٥				1	-	
Use II	74HO	070.10 070.20 If a joint return, spouse's first name and initial	Lest	nai		<u>,,, ,</u>	<u> </u>			Spous	's Social S	ecurity N	umber
iab		0=0.40			06	35.1	0				1 0	55	
Other		070.30 070.40 Address (number, street and spertment number)								A			A
please or ty	•	075									. IMPO ou mus		-
Of L	ype.	City, State and Zip Code								^		s) abov	-
		085 095 100										J, 0000	
If you	and v	our tax preparer need Idaho income tax forms and	instruction	\S	mailed to y	ou i	next ye	ar, check	the bo	ox.	• []	
,		(MUST MATCH FEDERAL RETURN)		6	Sa 🔲 Yours	elf		Spouse				r number : s checked	
G	1 2	Single Married filing joint return (even if only one had income	9	ŀ	Caution:	If y	our pare	nt or som	eone el	se ca	n claim		- 080
STATUS	3		Z			-		pendent d		r her	tax retu	m,	
Y		Enter spouse's SSN shove	E	ĺ				eck box 6					• 090
		and full name here. IRS 150	e		b Number	of yo	our depe	ndent chil	idren tre	om te	derai to	m	- 030
FILING	4 [Enter name of person	EXEMPTION			. .			£nd	! 6			• 100
⊒	l _	who qualifies you.	🍒		c Number	or or	ner depi	endents in	om reu	atai i	OI III	·•••••••• ·	
匸	5	Qualifying widow(er) with dependent child			is Add Boom		h and a						1 1
		Year spouse died: 19 American Herita	age Democr	1	d Add lines		Natural Law			Repub		No speci	fic party
HEACH		the firm income tax to go to the idaho 7. Yourself 1 =	2 1	_	3 - 📙		4 -	5 *		6 "	H	7:	H
車		Campaign Fund (#2 on joint return) 8. Spouse		نسا	<u> </u>		• اسبا		<u> </u>	ΓĪ	<u> </u>		
	INCO	ME. See instructions, page 5. Inter your federal adjusted gross income from federal Form	n 1040, line	9 ?	?; federal Fo	rm 1	1040A, I	ine ??;					
뿚	9. LI	rederal Form 1040EZ, line?. Attach a complete copy o	f your feder	ai	return.					9	IRS 1	95	00
COMES		TIONS. See instructions, page 5.											
	10 F	ederal net operating loss carryforward included in line 9		•••		•••••		• • • • • • • • • • • • • • • • • • • •		10	IRS :	355	00
W-2	11. C	apital loss carryforward incurred outside the state before	becoming a	BN	Idaho reside	nt		••••••		11	IRS	360	00
	12. In	terest and dividends not taxable under federal law				****		••••••		12	IRS	365	00
F	13. 0	ther additions. Attach explanation		•••	••••••	•••••	••••••			13	IRS	370	00
STATE		come and additions. Add lines 9 through 13.							. ,	14			00
		RACTIONS. See instructions, pages 5 through 7.											
ATTACH	15. ld	aho net operating loss carryforward. Attach Form 56		••••	······ •	15	IRS 3	375	00				
E	16. S	tate income tax refund if included in federal income		• • • •	• • • • • • • • • • • • • • • • • • • •	16	IRS 3	380	00				1
4	17. In	sterest from U.S. Government obligations	• • • • • • • • • • • • • • • • • • • •	••••	•••••••	17	_IRS_:		00				i i
	18. ln	sulation of Idaho residence		•••		18	IRS :		00				
ш	19. A	Iternative energy devices. Attach Form 39		٠٠٠٠		19	IRS		00				i.
H	20. C	hild/dependent care. Attach federal Form 2441 or 1040	A, Schedule	. 2		20 21	_IRS_		00		Sec.		
Ī	21. R	etirement benefits deduction. Attach Form 39		••••		22	IRS		00	12.5 12.5			- 1.1 - 1.1 - 1.1
Z	22. S	ocial security and railroad benefits, if included in federal i	come	•••		23	IRS IRS		00	92. s			
PAYMENT	23. To	achnological equipment donation	*************	•••		24	IRS		00				
₹	24. ic	laho capital gains deduction. Attach Form CGdoption expenses	***********	•••		25	IRS		00		790) 790)		
	25. A	doption expenses		••••		26	IRS		00	100			Ş
ATTACH	26. ld	iaho medical savings account - contributions and interest the subtractions. Attach Form 39		••••		_	IRS		00				
¥	27. 0	OTAL SUBTRACTIONS. Add lines 15 through 27.	*** *************************	•••	-	نتت	11.0	100		28			00
A	28.	UIAL SUBTRACTIONS. AND IIIISS TO CHOUGH 27.								T^{\dagger}			
	20 F	OTAL ADJUSTED INCOME. Subtract line 28 from line 14	4.						•	29	IRS 4	440	00
	j 29. II	r penalties of perjury, I declare that to the best of my known	owledge and	d E	oelief this ret	um	is true, c	orrect an	d comp	lete.			
	With	in 120 days of receiving this return, the Idaho State Tax	Commission	n	nay contact	the	paid pre	parer to d	scuss i	t.			
	Your sig)		Paid prepare	's sig	nature			Prepi	irer's EIN,	SSN, or F	TIN
SIGN	•				•					<u> </u>			
HERE	Spouse	's signature (if a joint return, BOTH MUST SIGN) Days	time phone		Address and	phon	a number						
	1.				[

67. OVERPAID. Line 63 minus lines 56 and 65. This is the amount you overpaid. 167.

68. REFUND. Amount of line 67 to be refunded to you.

69. ESTIMATED TAX. Amount of line 67 to be applied to your 2000 estimated tax.

00 🛭

00

IRS 620

00

IRS 615

IDAHO SUPPLEMENTAL SCHEDULE

1999

	ne year January 1 - December 31, 1999, o				s	ocial Security	Number
IT	I: For Form 40 filers. If you are filing For	m 43, use PART II on th	e back o	of this form	<u>n</u>		
١.	Alternative Energy Device Deduction. Se	e instructions, page 20.					
	Year Acquired Type of Device	Total Cost		Percent	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	1. 1999	\$	X	40%		1	
	2. 1998	\$	X	20%		2	
	3. 1997	\$	X	20%		3	
	4. 1996	\$	Х	20%	=	4	
	5. Total deduction. Add lines 1 through 4. Ent	ter here and on line 19, For	m 40.			5	
 3.	Retirement Benefits Deduction. See instr	uctions, page 20.					
	1. If single enter \$16,788, or if married filing jo	ointly enter \$25,182	1			~	A
	2. Retirement benefits received under federal F		2 IR	S 625			
	3. Retirement benefits received under Social S			S 630		· EXERT	
	4. Balance (line 1 minus lines 2 and 3)	*************************				4	
	5. Amount of eligible retirement annuity include	ed in federal income		***********		5 IRS	635
	6. Enter the smaller of lines 4 or 5 here and on	line 21, Form 40.				6 IRS	640
<u> </u>	Other Subtractions. See Instructions, page	ges 20 and 21.			<u> </u>		
	1. Maintaining a home for the aged and/or dev	elopmentally disabled				1 IRS	660
	2. Idaho lottery winnings, less than \$600 per ;					2 IRS	665
	3. Income earned on a reservation by a Native					3 IRS	670
	4. Other subtractions. Identify	***************************************	•••••			4 IRS	675
	5. Total other subtractions. Add lines 1 throug	h 4. Enter on line 27, Forr	n 40.			5	
),	Credit for Income Taxes Paid to Another S			•			
	1. Idaho tax, line 39, Form 40					Attach a c	opy of the
	2. Other state's adjusted income		2				x return a: Form 39
							for which
						each state	
	 Idaho adjusted income from line 29, Form 4 Divide line 2 by line 3. Enter percentage he 	0			%	credit is c	
	3. Idaho adjusted income from line 29, Form 4	0re	4		% 	credit is c	
	3. Idaho adjusted income from line 29, Form 44. Divide line 2 by line 3. Enter percentage he	0 re	4		% 	credit is c	
	 Idaho adjusted income from line 29, Form 4 Divide line 2 by line 3. Enter percentage he Multiply line 1 by line 4. Enter amount here Other state's tax due less its income tax cre 	0re	4		%	credit is c	
	 Idaho adjusted income from line 29, Form 4 Divide line 2 by line 3. Enter percentage he Multiply line 1 by line 4. Enter amount here Other state's tax due less its income tax cre Enter the smaller of lines 5 or 6 here and on 	0	4		%	credit is c	
	 Idaho adjusted income from line 29, Form 4 Divide line 2 by line 3. Enter percentage he Multiply line 1 by line 4. Enter amount here Other state's tax due less its income tax cre Enter the smaller of lines 5 or 6 here and on Maintaining a Home for a Family Member 	0edits	4		%	credit is c	
	 Idaho adjusted income from line 29, Form 4 Divide line 2 by line 3. Enter percentage he Multiply line 1 by line 4. Enter amount here Other state's tax due less its income tax cr Enter the smaller of lines 5 or 6 here and or Maintaining a Home for a Family Member Developmental Disability. See instruction 	o	amily Mo	ember Wit	%	credit is c	laimed.
	 Idaho adjusted income from line 29, Form 4 Divide line 2 by line 3. Enter percentage he Multiply line 1 by line 4. Enter amount here Other state's tax due less its income tax cro Enter the smaller of lines 5 or 6 here and on Maintaining a Home for a Family Member Developmental Disability. See instruction Did you maintain a home for an immediate for an immedia	o	amily Mo	ember Wit	%	credit is c	
	 Idaho adjusted income from line 29, Form 4 Divide line 2 by line 3. Enter percentage he Multiply line 1 by line 4. Enter amount here Other state's tax due less its income tax cro Enter the smaller of lines 5 or 6 here and on Maintaining a Home for a Family Member Developmental Disability. See instruction Did you maintain a home for an immediate of than one-half of his/her support? You and y 	o	amily Mo	ember Wit	%	credit is c	laimed.
	 Idaho adjusted income from line 29, Form 4 Divide line 2 by line 3. Enter percentage he Multiply line 1 by line 4. Enter amount here Other state's tax due less its income tax cro Enter the smaller of lines 5 or 6 here and on Maintaining a Home for a Family Member Developmental Disability. See instruction Did you maintain a home for an immediate for an immedia	o	amily Mo	ember Wit	% ha	credit is c	laimed.
	 Idaho adjusted income from line 29, Form 4 Divide line 2 by line 3. Enter percentage he Multiply line 1 by line 4. Enter amount here Other state's tax due less its income tax cre Enter the smaller of lines 5 or 6 here and or Maintaining a Home for a Family Member Developmental Disability. See instruction Did you maintain a home for an immediate of than one-half of his/her support? You and y Did you maintain a home for an immediate of the pool of the	o	amily Mo	ember Wit	% ha	credit is c	laimed.
	 Idaho adjusted income from line 29, Form 4 Divide line 2 by line 3. Enter percentage he Multiply line 1 by line 4. Enter amount here Other state's tax due less its income tax cro Enter the smaller of lines 5 or 6 here and on Maintaining a Home for a Family Member Developmental Disability. See instruction Did you maintain a home for an immediate it than one-half of his/her support? You and y Did you maintain a home for an immediate it provide more than one-half of his/her support 	o	amily Mo	ember Wit	% ha	credit is c	laimed.
	 Idaho adjusted income from line 29, Form 4 Divide line 2 by line 3. Enter percentage he Multiply line 1 by line 4. Enter amount here Other state's tax due less its income tax cre Enter the smaller of lines 5 or 6 here and or Maintaining a Home for a Family Member Developmental Disability. See instruction Did you maintain a home for an immediate of than one-half of his/her support? You and you maintain a home for an immediate of provide more than one-half of his/her support for you answered YES to either question, con 	o	amily Mo	ember Wit	h a	credit is c	No No Check h
	 Idaho adjusted income from line 29, Form 4 Divide line 2 by line 3. Enter percentage he Multiply line 1 by line 4. Enter amount here Other state's tax due less its income tax cro Enter the smaller of lines 5 or 6 here and on Maintaining a Home for a Family Member Developmental Disability. See instruction Did you maintain a home for an immediate of than one-half of his/her support? You and y Did you maintain a home for an immediate of provide more than one-half of his/her support fryou answered YES to either question, con List each family member you are claiming: 	o	amily Moder and proposed in a	erovide more	% h a	redit is c Yes Yes	No No Check he developm
	 Idaho adjusted income from line 29, Form 4 Divide line 2 by line 3. Enter percentage he Multiply line 1 by line 4. Enter amount here Other state's tax due less its income tax cro Enter the smaller of lines 5 or 6 here and on Maintaining a Home for a Family Member Developmental Disability. See instruction Did you maintain a home for an immediate of than one-half of his/her support? You and y Did you maintain a home for an immediate of provide more than one-half of his/her support fryou answered YES to either question, con List each family member you are claiming: 	o dits dine 40, Form 40. Age 65 or Older, or a Fa, pages 21 and 22. Samily member age 65 or or our spouse do not qualify. Samily member with a devert? You and your spouse in a plete lines 3 and 4.	amily Moder and proposed in a	provide more	% h a	redit is c The second of the	No No Check he developm
	 Idaho adjusted income from line 29, Form 4 Divide line 2 by line 3. Enter percentage he Multiply line 1 by line 4. Enter amount here Other state's tax due less its income tax cro Enter the smaller of lines 5 or 6 here and on Maintaining a Home for a Family Member Developmental Disability. See instruction Did you maintain a home for an immediate of than one-half of his/her support? You and y Did you maintain a home for an immediate of provide more than one-half of his/her support fryou answered YES to either question, con List each family member you are claiming: 	o dits dine 40, Form 40. Age 65 or Older, or a Fa, pages 21 and 22. Samily member age 65 or or our spouse do not qualify. Samily member with a devert? You and your spouse in a plete lines 3 and 4.	amily Moder and proposed in a	provide more	% h a	redit is c The second of the	No No Check he developm
	 Idaho adjusted income from line 29, Form 4 Divide line 2 by line 3. Enter percentage he Multiply line 1 by line 4. Enter amount here Other state's tax due less its income tax cro Enter the smaller of lines 5 or 6 here and on Maintaining a Home for a Family Member Developmental Disability. See instruction Did you maintain a home for an immediate of than one-half of his/her support? You and y Did you maintain a home for an immediate of provide more than one-half of his/her support fryou answered YES to either question, con List each family member you are claiming: 	o dits dine 40, Form 40. Age 65 or Older, or a Fa, pages 21 and 22. Samily member age 65 or or our spouse do not qualify. Samily member with a devert? You and your spouse in a plete lines 3 and 4.	amily Moder and proposed in a	provide more	% h a	redit is c The second of the	No No Check he developm
	 Idaho adjusted income from line 29, Form 4 Divide line 2 by line 3. Enter percentage he Multiply line 1 by line 4. Enter amount here Other state's tax due less its income tax cro Enter the smaller of lines 5 or 6 here and on Maintaining a Home for a Family Member Developmental Disability. See instruction Did you maintain a home for an immediate of than one-half of his/her support? You and y Did you maintain a home for an immediate of provide more than one-half of his/her support fryou answered YES to either question, con List each family member you are claiming: 	o dits dine 40, Form 40. Age 65 or Older, or a Fa, pages 21 and 22. Samily member age 65 or or our spouse do not qualify. Samily member with a devert? You and your spouse in a plete lines 3 and 4.	amily Moder and proposed in a	provide more	% h a	redit is c The second of the	No No Check he developm
	 Idaho adjusted income from line 29, Form 4 Divide line 2 by line 3. Enter percentage he Multiply line 1 by line 4. Enter amount here Other state's tax due less its income tax cro Enter the smaller of lines 5 or 6 here and on Maintaining a Home for a Family Member Developmental Disability. See instruction Did you maintain a home for an immediate of than one-half of his/her support? You and y Did you maintain a home for an immediate of provide more than one-half of his/her support fryou answered YES to either question, con List each family member you are claiming: 	o dits dine 40, Form 40. Age 65 or Older, or a Fa, pages 21 and 22. Samily member age 65 or or our spouse do not qualify. Samily member with a devert? You and your spouse in a plete lines 3 and 4.	amily Moder and proposed in a	provide more	% h a	redit is c The second of the	laimed.

EDITS AND CROSS CHECKS FOR IDAHO FORM 40

The following edit guidelines MUST be included in your programs to insure that the Idaho return is correctly processed:

- 1. Tax Period must equal 12/99.
- 2. Filing status must equal federal filing status.
- 3. Number of exemptions (line 6d) must equal federal number of exemptions.
- 4. Line 9 must equal Federal AGI.

Form 1040 - (line 33) Form 1040A - (line 18) Form 1040EZ - (line 4)

- 5. Line 16 must equal Federal Form 1040 line 10.
- 6. Line 19 cannot be greater than \$5000.
- 7. Line 21 must equal Schedule 39 section B line 6.
- 8. Line 25 cannot be greater than \$3000.
- 9. Line 26 cannot be greater than \$2401 for filing status 1,4,5. Line 26 cannot be greater than \$4300 for filing status 2.
- 10. If line 32 is greater than zero then line 35 must be zero.
- 11. If line 32 is greater than zero then line 32 must equal line 28 Federal Schedule A.
- 12. Line 33 must equal line 5 of Federal Schedule A.
- 13. If line 35 is greater than zero then lines 32 and 33 must equal 0.
- 14. Line 37 must equal federal exemption amount.
- 15. Line 40 must = 0
- 16. Lines 9 through 13 added together minus lines 15 through 27 must equal line 29.
- 17. Line 38 = (line 29 ((line 35 + (line 32 line 33)) + line 37)).
- 18. For line 41 if filing status = 2, 4 or 5 maximum allowable is 20% of tax (line 39) or a maximum of \$100.

If filing status = 1, maximum allowable is 20% of tax (line 39) or a maximum of \$50.

- 19. For line 43 if filing status = 2, 4 or 5 maximum allowable is 20% of tax (line 39) or a maximum of \$200.
 - If filing status = 1, maximum allowable is 20% of tax (line 39) or a maximum of \$100.
- 20. Line 44 cannot be greater than \$30,000.
- 21. Line 45 cannot be greater than \$2000.
- 22. Line 53 must NOT be less than zero.
- 23. Line 59 must NOT be greater than \$300.
- 24. Line 61 must equal the total of Idaho Income Tax Withheld from all W-2s.
- 25. Line 39 calculate per following tax schedule:

RATE SCHEDULE FOR SINGLE TAXPAYERS

If amount on line 38 is			Enter on line 3 the amount over			
	Less	than	\$ 1000		2%	\$
1000	but le	ss tha	n 2000	\$20	+ 4%	1000
2000	,,	"	3000	\$60	+ 4.5%	2000
3000	"	"	4000	\$105	+ 5.5%	3000
4000	"	"	5000	\$160	+ 6.5%	4000
5000	"	"	7500	\$225	+ 7.5%	5000
7500	"	"	20000	\$412.	50 + 7.8%	7500
	(Over	20000	\$1387	'.50 + 8.2%	20000

RATE SCHEDULE FOR MARRIED FILING JOINT/QUALIFYING WIDOW(ER)

If amount on line 38 is			Enter on line 3 he amount over			
	Les	s than S	\$ 2000	29	6	\$
2000	but l	ess thai	n 4000	\$40	+ 4%	2000
4000	,,	"	6000	\$120	+ 4.5%	4000
6000	44	"	8000	\$210	+ 5.5%	6000
8000	44	"	10000	\$320	+ 6.5%	8000
10000	"	"	15000	\$450	+ 7.5%	10000
15000	"	"	40000	\$825	+ 7.8%	15000
		Over	40000	\$2775	+ 8.2%	40000

ELECTRONIC FILING IDAHO STATE TAX COMMISSION GENERIC RECORD LAYOUT FOR FORM 43

IDENTIFICATION	LENGTH	DESCRIPTION
Byte Count, Page 1	4	"2397" for fixed; "nnnn" for variable format
Start of Record Sentinel	4	Value "***"
Record ID	26	Value "StbbnnnnbbccPG1bssssssss" (nnnn = Form #"0001") (cc = Form Occur. "01") (sssssssss = Prime SSN)
State Code	2	Value "ID"
City Code	2	No Entry
Declaration Control Number	14	Numeric (same as IRS)
Return Sequence Number	16	Numeric
State-Return-Indicator	1	Numeric
State-Return-Flag	1	Numeric
State-Routing Transit Number	9	Numeric
State-Deposit Account Number	17	Numeric
State-Checking Account	1	Alphanumeric Values "X" or " "
State-Savings Account	1	Numeric Values "X" or " "
	Byte Count, Page 1 Start of Record Sentinel Record ID State Code City Code Declaration Control Number Return Sequence Number State-Return-Indicator State-Return-Flag State-Routing Transit Number State-Deposit Account Number	Byte Count, Page 1 4 Start of Record Sentinel 4 Record ID 26 State Code 2 City Code 2 Declaration Control Number 14 Return Sequence Number 16 State-Return-Indicator 1 State-Return-Flag 1 State-Routing Transit Number 9 State-Deposit Account Number 17 State-Checking Account 1

IRS 049	Online State Return	1	Alphanumeric Value "O" = Online
IRS 050 IDTC IDTC IDTC IDTC	State Numeric Area .10 Preparer SSN/PTIN .20 Preparer EIN .30 Preparer ZIP .30 Preparer ZIP+ 4	27 9 9 5 4	Numeric Alphanumeric (byte 01-09) Numeric (byte 10-18) Numeric (byte 19-23) Numeric (byte 24-27)
IRS 052 IDTC IDTC IDTC IDTC IDTC IDTC IDTC	State Alphanumeric Area .10 Mailbox ID .20 Preparer Firm Name .30 Preparer Address .40 Preparer City .50 Preparer State .60 Preparer Self-Empl Ind	93 5 35 30 20 2	Alphanumeric Alpha (byte 01-05) Alpha (byte 06-40) Alpha (byte 41-70) Alpha (byte 71-90) Numeric (byte 91-92) Numeric (byte 93)
IRS 055	Spouse SSN	9	Numeric
IRS 060 IDTC IDTC	Name Line 1 .10 Prime Last Name .20 Suffix	35 32 3	Alphanumeric
IRS 065 IDTC IDTC	Name Line 2 .10 Spouse Last Name .20 Suffix	35 32 3	Alphanumeric
IRS 070 IDTC IDTC IDTC IDTC	Name Line 3 .10 Prime First Name .20 Prime Middle Init30 Spouse First Name .40 Spouse Middle Init.	35 16 1 16 1	Alphanumeric Alpha (byte 01-16) Alpha (byte 17) Alpha (byte 18-33) Alpha (byte 34) NOT USED (byte 35)
IRS 075 IDTC	Address Line 1 .10 Home Address (no., street)	35 30 5	Alphanumeric Alphanumeric NOT USED
IRS 080	Address Line 2	35	NOT USED

IRS 085 IDTC	City .10 City	22 20 2	Alphanumeric Alphanumeric NOT USED
IRS 090	City Code	5	NO ENTRY
IRS 095	State	2	Alphanumeric
IRS 100 IDTC	Zip Code .10 Zip Code .20 Zip Code Extension .30 Delivery Point Bar Code Loc	12 5 4 3	Numeric Numeric (byte 01-05) Numeric (byte 06-09) Numeric (byte 10-12)
IRS 105	County	20	NO ENTRY
IRS 110	County Code	5	NO ENTRY
IRS 115	Telephone Number	12	Alphanumeric Example: 208-334-7569
IRS 150	Federal Filing Status	1	Numeric Valid Codes 1,2,4,5
IRS 155	Total Federal Exemptions	2	Numeric <i>Note</i> : Valid Range 00-99
IRS 160	Wages, Salaries, Tips	12	Optional Entry
IRS 165	Taxable Interest	12	Optional Entry
IRS 170	Tax Exempt Interest	12	Optional Entry
IRS 175	Dividends	12	Optional Entry
IRS 180	State Refund	12	Optional Entry
IRS 185	Taxable Social Security Benefit	12	Optional Entry

IRS 190	Keogh Plan & SEP Deductions	12	Optional Entry
IRS 195 Line #30a	Federal Total Adjusted Income	12	Numeric
IRS 200	Standard/Itemized Deductions	12	Optional Entry
IRS 205	EIC Claimed	12	Optional Entry
IRS 300	Alphanumeric Field 1	80	
IDTC	.010 Software Developer Code	10	Alpha (byte 01-10)
IDTC	.020 Paid Preparer Name	31	Alpha (byte 11-41) 1040 Seq. 1340
IDTC	.030 Preparer Phone #	10	Alpha (byte 42-51)
IDTC	.040 Non Paid Preparer	13	Alpha (byte 52-64) 1040 Seq. 1330
IDTC	.050 Preparer State EIN	16	Alpha (byte 65-80)
IRS 305	Alphanumeric Field 2	80	
IDTC	.060	3	NO ENTRY
IDTC	.070 Label Box	1	Numeric (byte 4) Values: 0 for No 1for Yes
IDTC Line #6a	.080 Regular Exemption	1	Numeric (byte 5)
IDTC Line #6b	.090 Children Exemptions	2	Numeric (byte 6-7)
IDTC Line #6c	.100 Other Exemptions	2	Numeric (byte 8-9)
IDTC Line #7	.110 Prime Campaign Fund	1	Numeric (byte 10) Values: 0 for No 1 thru 7 for Yes

IDTC Line #8	.120 Spouse Campaign Fund	1	Numeric (byte 11) Values: 0 for No 1 thru 7 for Yes
IDTC Line #45a	.130 Prime Over 65 Indicator	1	Numeric (byte 12) Values: 0 for No 1 for Yes
IDTC Line #45a	.140 Spouse Over 65 Indicator	1	Numeric (byte 13) Values: 0 for No 1 for Yes
IDTC Line #45b	.150 Prime Blind Indicator	1	Numeric (byte 14) Values: 0 for No 1 for Yes
IDTC Line #45b	.160 Spouse Blind Indicator	1	Numeric (byte 15) Values: 0 for No 1 for Yes
IDTC Line #45c	.170 Claimed Dependent Indicator	1	Numeric (byte 16) Values: 0 for No 1 for Yes
IDTC Line #67	.180 DPA Indicator	1	Numeric (byte 17) Values: 0 for No 1 for Yes
IDTC	.190 Required to File Ind (See Instructions)	1	Numeric (byte 18) Values: 0 for No 1 for Yes
IDTC	.200 Penalty MSA Ind	1	Numeric (byte 19) Values: 0 for No 1 for Yes
IDTC SCHED 39	.210 Desc. of Other Subtractions SECTION A LINE #10	30	Alphanumeric (byte 20-49)
IDTC	.220 Form Code	1	Alphanumeric (byte 50) Value: "B" for Form 43
IDTC	.230 Prime Months is Idaho	2	Numeric (byte 51-52) Values: 0-12
IDTC	.240 Spouse Months is Idaho	2	Numeric (byte 53-54) Values: 0-12
IDTC	.250 Prime Residency Status	1	Numeric (byte 55) Values: 1-5

IDTC	.260 Spouse Residency Status	1	Numeric (byte 56) Values: 1-5
IRS 310	Alphanumeric Field 3	80	
IRS 315	Alphanumeric Field 4	80	
IRS 320	Alphanumeric Field 5	80	
IRS 350	Numeric Field 1 Amount Remitted	12	NO ENTRY
IRS 355 Line #9	Numeric Field 2 Wages, Salaries, Tips	12	Numeric
IRS 360 Line #10	Numeric Field 3 Interest Income	12	Numeric
IRS 365 Line #11	Numeric Field 4 Dividend Income	12	Numeric
IRS 370 Line #12	Numeric Field 5 Alimony received	12	Numeric
IRS 375 Line #13	Numeric Field 6 Business income or (loss) Federal Schedule C or C-EZ	12	Numeric
IRS 380 Line #14	Numeric Field 7 Capital gains or (loss) Federal Schedule D	12	Numeric
IRS 385 Line #15	Numeric Field 8 Other gains or (losses) Federal Form 4797	12	Numeric
IRS 390 Line #16	Numeric Field 9 IRA Distributions	12	Numeric

IRS 395 Line #17	Numeric Field 10 Pensions and Annuities	12	Numeric	
IRS 400 Line #18	Numeric Field 11 Rents, Royalties (etc.) Federal Schedule E	12	Numeric	
IRS 405 Line #19	Numeric Field 12 Farm Income or (loss) Federal Schedule F	12	Numeric	
IRS 410 Line #20	Numeric Field 13 Unemployment Compensation	12	Numeric	
IRS 415 Line #21	Numeric Field 14 Other Income	12	Numeric	
IRS 420 Line #23	Numeric Field 15 IRA deductions	12	Numeric	
IRS 425 Line #24	Numeric Field 16 Moving expenses Federal Form 3903 or 3903-F	12	Numeric	
IRS 430 Line #25	Numeric Field 17 Deduction Self Employment	12	Numeric	
IRS 435 Line #26	Numeric Field 18 Penalty on early withdrawal of savings	12	Numeric	
IRS 440 Line #27	Numeric Field 19 Deduction on Student Loan Intere	12 est/Alimony Paid	Numeric	
IRS 445 Line #29	Numeric Field 20 Idaho Adjusted Gross Income	12	Numeric	
IRS 450 Line #30a	Numeric Field 21 Federal Adjusted Gross Income	12	Numeric	

IRS 455 Line #31b	Numeric Field 22 Nontaxable Interest and Dividends	12	Numeric
IRS 460 Line #32b	Numeric Field 23 Other Additions	12	Numeric
♦IRS 465 Line #34b	Numeric Field 24 Idaho NOL Carryforward	12	Numeric
IRS 470 Line #36b	Numeric Field 25 Interest from U.S. Government	12	Numeric
IRS 475 Line #37b	Numeric Field 26 Child/Dependent care	12	Numeric
IRS 480 Line #39b	Numeric Field 27 Idaho Capital Gain Deduction.	12	Numeric
◆IRS 485 Line #40b	Numeric Field 28 Idaho Resident-Active duty military Pay earned outside of Idaho	12	Numeric
♦ IRS 490 Line #41b	Numeric Field 29 Idaho Medical Savings Account Contributions and Interest	12	Numeric LIMITATIONS APPLY (\$2,401) Single (\$4,300) Joint
IRS 495 Line #42b	Numeric Field 30 Other Subtractions	12	Numeric
IRS 500 Line #44a	Numeric Field 31 Total adjusted income	12	Numeric
IRS 505 Line #44b	Numeric Field 32 Idaho Total Adjusted Income	12	Numeric
IRS 510 Line #46	Numeric Field 33 Itemized Deductions	12	Numeric

IRS 515 Line #47	Numeric Field 34 State Income Tax in Itemized Deduction	12 on	Numeric
IRS 520 Line #49	Numeric Field 35 Standard Deduction	12	Numeric
IRS 525 Line #50	Numeric Field 36 Exemptions	12	Numeric
IRS 530 Line #54	Numeric Field 37 Idaho Taxable Income	12	Numeric
IRS 535 Line #55	Numeric Field 38 Tax	12	Numeric
IRS 540 Line #56	Numeric Field 39 Tax Paid Other States	12	NO ENTRY
IRS 545 Line #57	Numeric Field 40 Educational Contributions	12	Numeric LIMITATIONS APPLY (20% of the tax on line 55 or \$50 single, \$100 joint)
IRS 550 Line #58a	Numeric Field 41 Investment Tax Credit Earned	12	Numeric
IRS 555 Line #58b	Numeric Field 42 Investment Tax Credit Allowed	12	Numeric
IRS 560 Line #59	Numeric Field 43 Rehabilitation Contribution	12	Numeric LIMITATIONS APPLY (20% of the tax on line 55, or \$100 single, \$200 joint)
IRS 565 Line #60	Numeric Field 44 Post Consumer Waste credit	12	Numeric LIMITATIONS APPLY (30,000)
IRS 570 Line #61	Numeric Field 45 Natural Resource Conservation credit	12	Numeric LIMITATIONS APPLY (2,000)

♦IRS 575 Line #62	Numeric Field 46 Promoter-Sponsored event credit	12	Numeric
♦IRS 580 Line #64	Numeric Field 47 Special Fuels Tax Due	12	Numeric
IRS 585 Line #65	Numeric Field 48 Sales/Use Tax	12	Numeric
♦ IRS 590 Line #66	Numeric Field 49 Tax From Recapture	12	Numeric
IRS 595 Line #67	Numeric Field 50 Permanent Building Fund (See Instructions)	12	Numeric
IRS 600 Line #68	Numeric Field 51 Total Tax	12	Numeric
IRA 605 Line #69	Numeric Field 52 Nongame Wildlife Conservation Fund	12	Numeric
IRS 610	Numeric Field 53	12	No Entry
IRS 615 Line #70	Numeric Field 54 Children's Trust Fund	12	Numeric
IRS 620 Line #72	Numeric Field 55 Grocery Credit	12	Numeric
IRS 625 Line #73	Numeric Field 56 Old age home credit, or developmentally disabled	12	Numeric LIMITATIONS APPLY
♦ IRS 630 Line #74a	Numeric Field 57 Special Fuels Tax Refund	12	Numeric

♦ IRS 635 Line #74b	Numeric Field 58 Gasoline Tax Refund	12	Numeric
IRS 640 Line #75	Numeric Field 59 Idaho Income Tax Withheld	12	Numeric
IRS 645 Line #76	Numeric Field 60 Form 51 Payments	12	Numeric
IRS 650 Line #78	Numeric Field 61 Tax Due	12	Numeric
IRS 655 Line #79a	Numeric Field 62 Penalty	12	Numeric
IRS 660 Line #79b	Numeric Field 63 Interest	12	Numeric
IRS 665 Line #80	Numeric Field 64 Total Due	12	Numeric
IRS 670 Line #81	Numeric Field 65 Overpaid	12	Numeric
IRS 675 Line #82	Numeric Field 66 Amount to be Refunded	12	Numeric
IRS 680 Line #83	Numeric Field 67 Amount to be Applied to 2000 Taxes	12	Numeric
IRS 685 Sched 39	Numeric Field 68 SECTION A LINE 1A Adoption E	12 xpense	Numeric
IRS 690 Sched 39	Numeric Field 69 SECTION A LINE 1B Adoption E	12 xpense	Numeric
♦ IRS 695	Numeric Field 70	12	NO ENTRY
♦ IRS 700	Numeric Field 71	12	NO ENTRY

♦ IRS 705	Numeric Field 72	12	NO ENTRY
♦ IRS 710	Numeric Field 73	12	NO ENTRY
♦ IRS 715	Numeric Field 74	12	NO ENTRY
♦ IRS 720	Numeric Field 75	12	NO ENTRY
IRS 725	Numeric Field 76	12	Numeric
Sched 39	SECTION A LINE 2A	Home for the aged/disabled	
IRS 730	Numeric Field 77	12	Numeric
Sched 39	SECTION A LINE 2B	Home for the aged/disabled	
IRS 735	Numeric Field 78	12	Numeric
Sched 39	SECTION A LINE 3A	Idaho Lottery winnings	
IRS 740	Numeric Field 79	12	Numeric
Sched 39	SECTION A LINE 3B	Idaho Lottery winnings	
IRS 745	Numeric Field 80	12	Numeric
Sched 39	SECTION A LINE 4B	Income earned on reservation	
IRS 750	Numeric Field 81	12	Numeric
Sched 39	SECTION A LINE 5A	Workers compensation insurance	e
IRS 755	Numeric Field 82	12	Numeric
Sched 39	SECTION A LINE 5B	Workers compensation insurance	e
IRS 760	Numeric Field 83	12	Numeric
Sched 39	SECTION A LINE 6A	Partners and shareholders	
IRS 765	Numeric Field 84	12	Numeric
Sched 39	SECTION A LINE 6B	Partners and shareholders	
IRS 770	Numeric Field 85	12	Numeric
Sched 39	SECTION A LINE 7A	Insulation of Idaho residence	

IRS 775	Numeric Field 86	12	Numeric
Sched 39	SECTION A LINE 7B	Insulation of Idaho residence	
IRS 780	Numeric Field 87	12	Numeric
Sched 39	SECTION A LINE 8A	Technological equipment dor	nation
IRS 785	Numeric Field 88	12	Numeric
Sched 39	SECTION A LINE 8B	Technological equipment dor	nation
IRS 790	Numeric Field 89	12	Numeric
Sched 39	SECTION A LINE 11A	Other subtractions	
IRS 795	Numeric Field 90	12	Numeric
Sched 39	SECTION A LINE 11B	Other subtractions	

IRS FIELDS 800 THROUGH 925 ARE OMITTED, AS THERE ARE NO ENTRY FIELDS ON THIS FORM.

o Z	13	IDAHO PART-YEAR RESIDEN	IT & NONRES	SIDENT INCOME TAX	RETU	RN	13	33
M TC4399 B-27-99						• A I	RFW	М
For th	e vear	January 1 - December 31, 1999, or fiscal year	ear beginning	, 1999, endi	ng		, 20	00
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Your first name and initial	Lest ner	ne		Your Social Secur	ity Number	
		070.10 070.20		060			1	
	DAHO	If a joint return, spouse's first name and initial	Last ner			Spouse's Social S	ecurity Num	ber
	bel. rwise.	070.30 070.40				1 05	55 1	
	e print	070.30 070.40 Address (number, street and spertment number)					RTANTI	A
-	уре.					You must en	ter your S	SN(s)
		075 City, State and Zip Code			Full month	- 11	ova. If 230	
			00		idaho this			-
Reside	ncy St		t on Active Military	Duty Nonresident Part-	Year Res	ident Milita	ry Nonre	sident
Check o	ne for you	rsett Yourself • 7 250 •		, · D		E	• 🗀	
if a joint		Spouse 200		³ • □	· 🗆		• 🗆	
If you	and y	our tax preparer need Idaho income tax form	s and instructions	mailed to you next year, chec	ck the b			
	1	(MOUST MATCH FEDERAL RETURN) Single		Sa 🗌 Yourself 🔲 Spous	B	Enter ni boxes c	amber of hecked	
S	2 =	Married filing joint return (even if only one had in	come)	Caution: If your parent or so			•	080
5	3	Married filing separate return	ĺŽĺ	you as a dependent		or her tax retui	rn,	
STATUS		Enter spouse's SSN above IRS 150		DO NOT check box		fadanal fan		090
	4 [and full name here. Head of household	\$	b Number of your dependent cl	niaren Tr	om receral for	m •	030
FILING	T L	Enter name of person	XEM	c Number of other dependents	from for	leral form	•	100
		who qualifies you.	<u>\</u>	c indition of other dependents	110111 180	iolai toitti	******	
_	5	Qualifying widow(er) with dependent child Year spouse died: 19		d Add lines 6a, b and c				
	IDAHC	FLECTION CAMPAIGN FUND Americ	en Heritage Democrati	c Liberta <u>rian</u> Natural <u>La</u> w Re	form,	Republican	No specific	party
Щ	I want \$	1 of my income tax to go to the idaho Cempaign Fund (\$2 on joint return) 7. Yourself 8. Spouse	: 2:	3 4 4 5		6 :	7 • -	ㅓ
HERE		INCOME. See instructions, pages 12 and 13.			1	Idaho A	mounts	
	9. W	ages, salaries, tips, etc. Attach Form(s) W-2			•	9 IRS 35	5	00
COPIES		exable interest income. Attach federal Schedule B				10 IRS 36	0	00
8		vidend income. Attach federal Schedule B if over				11 IRS 36	5_	00
Ŋ		imony received				12 IRS 37	0	00
3		siness income or (loss). Attach federal Schedule C				13 IRS 37		00
STATE W-2		spital gain or (loss). If required, attach federal Sch				14 IRS 38	0	00
ST		ther gains or (losses). Attach federal Form 4797.				15 IRS 38		00
¥		A distributions (taxable amount)			 	16 IRS 39		00
ATTAC	17. Pe	nsions and annuities (taxable amount)			•••• •	17 IRS 39		00
A		ents, royalties, partnerships, S corporations, trusts				18 IRS 40		00
		rm income or (loss). Attach federal Schedule F nemployment compensation				19 IRS 40 20 IRS 41		00
ш		ther income. List type and amount				20 IRS 41 21 IRS 41		00
HERE	ſ	OTAL INCOME. Add lines 9 through 21.	*************************			22	<u> </u>	00
		ADJUSTMENTS. See instructions, page 13.	······································					100
PAYMENT		eductions for IRAs and medical savings accounts .				23 IRS 42	Λ	00
Ξ		oving expenses. Attach federal Form 3903 or 390				24 IRS 42		00
¥		eductions for self-employment tax, health insurance				25 IRS 43	0	00
=	26. Pe	naity on early withdrawal of savings	••••••	***************************************	• [26 IRS 43		00
2		eductions for student loan interest and alimony pai				27 IRS 44		00
ATTACH		OTAL ADJUSTMENTS. Add lines 23 through 27		**********************************	[28		00
•		DJUSTED GROSS INCOME. Subtract line 28 from				29 IRS 44	5	00
		penalties of perjury, I declare that to the best of my				ite.		
		120 days of receiving this return, the Idaho State			scuss it.			
	Your sign	eture Total Control Co	Date	Paid preparer's signature		Preparer's EIN, SS	iN, or PTIN	
SIGN	e Sparrage	signature (if a joint return, BOTH MUST SIGN)	Doubling phone	Address and phone number		•		
HERE	apouse's	sificiarità in a four carrett protti sinos : 3(614)	Daytime phone	Anness sun hubus unubel				

Form 4	3 (1!	99)	_	Column A - Tota	<u> </u>	·	Column B - Ida	he
TC439		8-27-99 O. Enter amount from federal Form 1040, line 33, 1040A, line 18, or 1040EZ,			1	\vdash		
SS :		line 4 in Column A. Enter amount from line 29 in Column B	30	IRS 450	100	<u> </u>		00
TIONS	<u>"</u>]:	1. Interest and dividends not taxable under federal law	31				RS 455	00
ADDITIONS See	띭;	2. Other additions. See instructions and attach explanation	32		00	• 1	RS 460	00
¥	蹈 :	3. Income after additions. Add lines 30, 31 and 32.	33		100	<u> </u>	DC 465	00
		4. Idaho net operating loss carryforward. Attach Form 56	34				RS 465	00
		5. State income tax refund included in line 30, Column A	35			_		
10	\$	6. Interest from U.S. Government obligations	36			T	RS 470	00
14-15	:	77. Child/dependent care. Attach federal Form 2441 or 1040A, Schedule 2	37 38				RS 475	100
Ĕ	:	88. Social security and railroad benefits included in line 30, Column A	39		00	_	RS 480	00
SUBTRACTIONS	, :	99. Idaho capital gains deduction. Attach Form CG.	40				RS 485	00
18 E	- •	10. Idaho resident - Active duty military pay earned outside of idaho	41	British Calebra	00		RS 490	00
S S		11. Idaho medical savings account - contributions and interest	42	-	100	-	RS 495	00
	'	12. Other subtractions. Attach Form 39	43		00	 	100	00
		13. TOTAL ADJUSTED INCOME. Subtract line 43 from line 33.		IRS 500		-	RS 505	100
	4	Ta, if age 65 or older Yourself Spouse		blind [
	1	15. CHECK c. If your parent or someone else can claim you as a dependent,						
		16. Itemized deductions. Attach federal Schedule A. Federal limits apply.			00		1100 TO 1	
~	- 1	17. All state income taxes included on federal Schedule A, line 5			00			
<u> </u>		IS. Subtract line 47 from line 46				48		00
COMPUTATION		lg. Standard deduction. See instructions, page 16				49	IRS 520	00
OMPU		50. Multiply \$2750 by the number of exemptions claimed on line 6d. Federal li						00
Š Š		51. Add line 50 and the LARGER of line 48 or line 49.				51		00
See		52. Idaho percentage. Divide line 44, Column B, by line 44, Column A			•••••	52		%
¥	1	53. Multiply amount on line 51 by the percentage on line 52 and enter the resu	ılt he	эге		53		00
	- [54. Idaho taxable income. Subtract line 53 from line 44, Column B	*****	***************		54	IRS 530	00
		55. TAX from tables or rate schedule. See instructions, page 25.				55	IRS 535	00
		56. Income taxes paid to other states. Attach Form 39 & other state return.	56	IRS 540	00		i i i i i i i i i i i i i i i i i i i	
		77. Credit for contributions to educational entities			00			1874 4554 122
<i>'</i> A -	- 1.	58. Investment tax credit. Attach Form 49. Earned <u>• IRS 550</u> Allowed .			00			
CREDITS See	-	59. Credit for contributions to youth and rehabilitation facilities			00			
声。	5	30. Credit for production equipment using post-consumer waste	60	IRS 565	00	*		\$. 4 ±
ပ	- 11	31. Natural resources conservation credit	61	IRS 570	00			
	- 1	52. Promoter-sponsored event credit	62	IRS 575	00		Wed Adding	
		63. Line 55 minus lines 56 through 62. If less than zero, enter zero.				63		00
E		34. Special fuels tax due. Attach Form 75	•••••		•	64	IRS 580	00
¥.	2	35. Sales/Use tax due on mail order and other nontaxed purchases	• • • • • •	•••••••••	•	65	IRS 585	00
See 1	8	36. Tax from recapture of Idaho investment tax credit. Attach Form 49R	•••••	••••••••••	····			00
뿓	2	57. Permanent building fund. Check the box if you are receiving Idaho public a	ssist	ance payments	· • 🔲		IRS 595 1	
5		88. TOTAL TAX. Add lines 63 through 67.				68	IRS 600	00
SS	ام	69. I wish to donate to the Nongame Wildlife Conservation Fund		****************		69	IRS 605	00
e 🖺	-	70. I wish to donate to the Children's Trust Fund/Child Abuse Prevention				70	IRS 615	00
DONATIONS OTHER TAXES See See	E					71		00
<u>8</u>	_	71. TOTAL TAX PLUS DONATIONS. Add lines 68 through 70.					IRS 620	00
(ا م	72. Grocery credit. Nonresidents do not qualify. See instructions, page 18	ijesh	led. Attach Form	= 39	72	IRS 625	00
PAYMENTS See	<u>.</u>			Attach Form		74	1	00
	٦	74. Special fuels tax refund <u>IRS 630</u> Gasoline tax refund <u>IRS 6</u> :75. Idaho income tax withheld. Attach Form(s) W-2						00
``````````````````````````````````````	ě	76. 1999 Form 51 payment(s) and amount applied from 1998 return	•••••	••••••		76	IDS 645	00
Ω.	اۃ	76. 1999 Form 51 payment(s) and amount applied from 1990 feet 1997. TOTAL PAYMENTS AND OTHER CREDITS. Add lines 72 through 76.	•••••			77		00
				TO UNE OF			1	
		If line 71 is more than line 77, GO TO LINE 78. If line 77 is more than line 71				T		1.5.5
		78. TAX DUE. Subtract line 77 from line 71				78	IRS 650	00
3		79. Penalty • IRS 655 Interest from the due date • IRS 660						1
٥		Check box if penalty is due to an ineligible withdrawal from an Idaho medi	cal s	avings account.	• 📙	79		00
Ĭ	6	·						
2 e 3		80. TOTAL DUE. Add lines 78 and 79	•••••		<b>.</b>	80	IRS 665	00
REFUND / TOTAL DUE See		B1. OVERPAID. Line 77 minus lines 71 and 79			00			
Ę	- 1				^^			
Æ		82 REFUND. Amount of line 81 to be refunded to you	82	IKS 6/5	00		LAW S. A.	
	- 1	83. ESTIMATED TAX. Amount of line 81 to be applied to your 2000 estimate				83	IRS 680	00
	1.							

majs) as shown on return							Social	Security Nu	mber
									<u> </u>
ART II: For Form	43 filers. If you are fi	iling Form 40, us	se PART I on	the f					
	tions. See instruction					lumn A Total		Colum Idah	
1. Adoption ex	cpenses	****************		1	IRS 685			690	
2. Maintaining	a home for the aged an	d/or developmenta	illy disabled	2	IRS 725	<u> </u>	IRS	730	
	y winnings, less than \$6			3	IRS 735	5	IRS	740	
4. Income ear	ned on a reservation by a	a Native American		4	ya din			3 745	
5. Worker's co	mpensation insurance	***************************************		_5	IRS 750	)		S 755	
	nd shareholder's pass-thr			6		)		3 765	
	f Idaho residence				IRS 770	)		<u> </u>	
8. Technologic	al equipment donation			8	IRS 780	)	IRS	3 785	
9. Alternative	energy device deduction	<b>)</b>							
Year									
Acquired	Type of Device	Total Cost	Percent	0.0				Na.	) \$.
<u>a. 1999</u>		<u> </u>	X 40% =	9a					
<u>b. 1998</u>		<u> </u>	X 20% =	9b		<u></u>			<del></del>
c. 1997		\$	X 20% =	9c					
d. 1996			X 20% =	9d			<del></del>		
10. Other subtr	actions. Identify		• • • • • • • • • • • • • • • • • • • •	10					
11. Total other:	subtractions.			ı	ł				
B. Credit for Inco Nonresidents ca	through 10. Enter on line  ome Taxes Paid to And  annot claim this credit.	other State by Pr Idaho residents on	active military	dents.	See ins	tructions	, pages	795 <b>23 and</b>	24.
B. Credit for Inconvenients of 1. Idaho adjust 2. Other state 3. Amount on	through 10. Enter on line one Taxes Paid to And annot claim this credit. It ted income from line 44, 's adjusted income lines 1 and 2 taxed by be	other State by Police on Idaho residents on Column B, Form 4	active military	dents, duty,	See ins	tructions	Attacl incom a separate each s	23 and h a copy le tax retu lirate Form	of the urn and 39 for vhich a
B. Credit for Inconvenients of Nonresidents of 1. Idaho adjus 2. Other state 3. Amount on 4. Idaho tax, li	through 10. Enter on line through 10. Enter on line to And annot claim this credit. It ted income from line 44, 's adjusted income lines 1 and 2 taxed by bine 55, Form 43	other State by Police Idaho residents on Column B, Form 4	active military	dents. duty,	See ins	tructions	Attaclincom a sepa	23 and h a copy le tax retu	of the urn and 39 for vhich a
B. Credit for Inconvenients of Nonresidents of 1. Idaho adjus 2. Other state 3. Amount on 4. Idaho tax, li 5. Divide line 3	through 10. Enter on line through 10. Enter on line to Andrews Paid to Andrews	other State by Paldaho residents on Column B, Form 4	active military	1 2 3 4 5	See ins	Section C	Attaclincom a sepa	23 and h a copy le tax retu lirate Form	of the urn and 39 for vhich a
B. Credit for Inconversidents of  1. Idaho adjus 2. Other state 3. Amount on 4. Idaho tax, li 5. Divide line : 6. Multiply line	through 10. Enter on line through 10. Enter on line to Andannot claim this credit. It ted income from line 44, 's adjusted income lines 1 and 2 taxed by bine 55, Form 43	other State by Paldaho residents on Column B, Form 4	active military	dents. duty,  1 2 3 4 5	See ins	Section C	Attaclincom a sepa	23 and h a copy le tax retu lirate Form	of the urn and 39 for vhich a
B. Credit for Inconversidents of 1. Idaho adjus 2. Other state 3. Amount on 4. Idaho tax, li 5. Divide line 3. Multiply line 7. Other state	through 10. Enter on line through 10. Enter on line to Andrews Paid to Andrews	other State by Paldaho residents on Column B, Form 4 contract the states contract the states contract the states contract the state contract the s	active military	dents., duty,	See ins	Section C	Attaclincom a separate credit	23 and h a copy le tax retu lirate Form	of the urn and 39 for vhich a
B. Credit for Inconversidents of 1. Idaho adjus 2. Other state 3. Amount on 4. Idaho tax, li 5. Divide line 3. Multiply line 7. Other state	through 10. Enter on line through 10. Enter on line to Andannot claim this credit. It ted income from line 44, 's adjusted income lines 1 and 2 taxed by bine 55, Form 43	other State by Paldaho residents on Column B, Form 4 contract the states contract the states contract the states contract the state contract the s	active military	dents., duty,	See ins	Section C	Attaclincom a separate credit	23 and h a copy le tax retu lirate Form	of the urn and 39 for vhich a
B. Credit for Inconvenients cannot be adjusted to the state of the sta	through 10. Enter on line through 10. Enter on line to Andrews Paid to Andrews	other State by Pollaho residents on Column B, Form 4 coth states	active military	dents., duty,	See ins complete	Section C	Attaclincom a separate credit	23 and h a copy le tax retu lirate Form	of the urn and 39 for vhich a
B. Credit for Inconvenients of Nonresidents of 1. Idaho adjus 2. Other state 3. Amount on 4. Idaho tax, li 5. Divide line 3. Multiply line 7. Other state 8. Divide line 9. Multiply line 9. Multiply line	through 10. Enter on line of the ted income from line 44, sadjusted income lines 1 and 2 taxed by bline 55, Form 43	other State by Paldaho residents on Column B, Form 4 coth states	active military	dents., duty,	See ins complete	Section C	Attaclincom a sepa each s	23 and h a copy le tax retu lirate Form	of the urn and 39 for vhich a
B. Credit for Inconvenients of Nonresidents of 1. Idaho adjus 2. Other state 3. Amount on 4. Idaho tax, lif 5. Divide line 3. Multiply line 7. Other state 8. Divide line 9. Multiply line 10. Enter the state 10.	through 10. Enter on line through 10. Enter on line Taxes Paid to And annot claim this credit. It ted income from line 44, is adjusted income	other State by Paldaho residents on Column B, Form 4 coth states	sctive military	dents., duty,	See ins complete	%	Attaclincom a separate credit	23 and h a copy le tax retu lirate Form	of the urn and 39 for vhich a
B. Credit for Inconvenients of Nonresidents of 1. Idaho adjus 2. Other state 3. Amount on 4. Idaho tax, li 5. Divide line 3. Multiply line 7. Other state 8. Divide line 9. Multiply line 10. Enter the state 5. Credit for Inco See instruction	through 10. Enter on line Taxes Paid to And annot claim this credit. It ted income from line 44, is adjusted income lines 1 and 2 taxed by brine 55, Form 43	other State by Paldaho residents on Column B, Form 4 contract the states contract the state of t	Form 43.	dents. duty,  1 2 3 4 5	See ins complete	%	Attaclincom a sepa each s credit	23 and h a copy le tax retu lirate Form state for v is claime	of the urn and 139 for which a d.
B. Credit for Inconvenients of the Nonresidents of the Nonresident	through 10. Enter on line Taxes Paid to And annot claim this credit. It ted income from line 44, is adjusted income	other State by Paldaho residents on Column B, Form 4 Count states	Form 43.	dents. duty,  1 2 3 4 5	See ins complete	%	pages below.  Attacl incom a sepa each s credit	a copy le tax returate Form state for v is claime	of the urn and a 39 for which a d.
B. Credit for Inconvenients of the Nonresidents of the Nonresident	through 10. Enter on line through 10. Enter on line Taxes Paid to Andannot claim this credit. It ted income from line 44, is adjusted income	other State by Paldaho residents on Column B, Form 4 Count states	Form 43.	dents. duty,  1 2 3 4 5 7 8	See ins complete	%	pages below.  Attacl incom a sepa each s credit  6	and a copy se tax returns for viscolaime	of the urn and a 39 for which a d.
B. Credit for Inconvenients of the Nonresidents of the Nonresident	through 10. Enter on line through 10. Enter on line manner claim this credit. It ted income from line 44, is adjusted income	other State by Paldaho residents on Column B, Form 4 coth states	Form 43. ho Residents	dents., duty,	See ins complete	%  Section C  %  %  ary Duty.	pages below.  Attacl incom a sepa each s credit  6  9  10	and a copy is tax returned for viscolaime is claime in a copy is tax returned for viscolaime in a copy is tax returned for vistate for vis	of the urn and a 39 for which a d.  of the urn and a 39 for which a
B. Credit for Inconversidents of the Nonresidents of the Nonreside	through 10. Enter on line Taxes Paid to And annot claim this credit. It ted income from line 44, 2's adjusted income	other State by Paldaho residents on Column B, Form 4 coth states	Form 43.  ho Residents	dents. duty,  1 2 3 4 5 7 8  on A 1 2 3 4	See ins complete	%  %  mary Duty.	pages below.  Attacl incom a sepa each s credit	and a copy se tax returns for viscolaime	of the urn and a 39 for which a d.  of the urn and a 39 for which a
B. Credit for Inconversidents of the Nonresidents of the Nonreside	through 10. Enter on line Taxes Paid to Andannot claim this credit. It ted income from line 44, 2 by line 3. Enter percent of a djusted income 3. Second 1. Enter percent of the 4 by line 5. Enter percent of the 4 by line 5. Enter percent of the 4 by line 5. Enter percent of the 5 by line 6. Enter percent of the 5 by line 7 by line 8. Enter percent of the 5 by line 8. Enter percent of the 5 by line 6 by	other State by Paldaho residents on Column B, Form 4 coth states c	Form 43.  ho Residents	dents. duty,  1 2 3 4 5 7 8  on Au  1 2 3 4	See ins complete	%  Section C  %  %  ary Duty.	pages below.  Attacl incom a sepa each s credit  Attacl incom a sepa each s credit	and a copy is tax returned for viscolaime is claime in a copy is tax returned for viscolaime in a copy is tax returned for vistate for vis	of the urn and 39 for which a d.  of the urn and 39 for which a
B. Credit for Inconversidents of the Nonresidents of the Nonreside	through 10. Enter on line through 10. Enter on line manner claim this credit. It ted income from line 44, is adjusted income	other State by Paldaho residents on Column B, Form 4 coth states c	Form 43.  ho Residents	dents. duty,  1 2 3 4 5 7 8  on Au  1 2 3 4	See ins complete	%  Section C  %  %  ary Duty.	pages below.  Attacl incom a sepa each s credit	and a copy is tax returned for viscolaime is claime in a copy is tax returned for viscolaime in a copy is tax returned for vistate for vis	of the urn and 39 for which a d.  of the urn and 39 for which a

#### EDITS AND CROSS CHECKS FOR IDAHO FORM 43

The following edit guidelines MUST be included in your programs to insure that the Idaho return is correctly processed:

- 1. Tax Period must equal 12/99.
- 2. Filing status must equal federal filing status.
- 3. Number of exemptions (line 6d) must equal federal number of exemptions.
- 4. Line 39 must equal line 11 of the CG form.
- 5. Line 41 cannot be greater than \$2401 for filing status 1,4, 5. Line 41 cannot be greater than \$4300 for filing status 2.
- 6. If line 46 is greater than zero then line 49 must be zero.
- 7. If line 46 is greater than zero then line 46 must equal line 28 Federal Schedule A.
- 8. Line 47 must equal line 5 of Federal Schedule A.
- 9. If line 49 is greater than zero then line 46 and 47 must equal zero.
- 10. Line 50 must equal federal exemption amount.
- 11. Line 35b must = 0 Line 38b must = 0 Line 56 must = 0
- 12. Line 68 must NOT be less than zero.
- 13. Line 72 must equal regular exemptions + children exemptions + other exemptions. See Instructions.
- 14. For line 57 if filing status = 2,4 or 5 maximum allowable is 20% of tax (line 55) or a maximum of \$100.
  - If filing status = 1, maximum allowable is 20% of tax (line 55) or a maximum of \$50.
- 15. For line 59 if filing status = 2,4 or 5 maximum allowable is 20% of tax (line 55) or a maximum of \$200.
  - If filing status = 1, maximum allowable is 20% of tax (line 55) or a maximum of \$100.
- 16. Line 73 must NOT be greater than \$300.
- 17. Line 75 must equal the total of Idaho Tax Withheld from all W-2's.

#### RATE SCHEDULE FOR SINGLE TAXPAYERS

If amount on line 38 is			ater on line 3 amount ove			
	Les	s than \$	1000	2%	ó	\$
1000	but le	ess than	2000	\$20	+ 4%	1000
2000	,,	"	3000	\$60	+ 4.5%	2000
3000	"	"	4000	\$105	+ 5.5%	3000
4000	"	"	5000	\$160	+ 6.5%	4000
5000	"	"	7500	\$225	+ 7.5%	5000
7500	"	"	20000	\$412.50	+ 7.8%	7500
		Over	20000	\$1387.50	+ 8.2%	20000

### RATE SCHEDULE FOR MARRIED FILING JOINT/QUALIFYING WIDOW(ER)

If amount on line 38 is			Enter on line 3 the amount ov	-		
	Les	s than S	\$ 2000		2%	\$
2000	but le	ess thai	n 4000	\$40	+ 4%	2000
4000	"	"	6000	\$120	+ 4.5%	4000
6000	44	"	8000	\$210	+ 5.5%	6000
8000	"	"	10000	\$320	+ 6.5%	8000
10000	"	"	15000	\$450	+ 7.5%	10000
15000	44	"	40000	\$825	+ 7.8%	15000
		Over	40000	\$2775	+ 8.2%	40000

#### UNFORMATTED RECORDS

If there are Idaho Forms 49, 49C, 49R, 56, 75, 75IMV and/or CG in a return these records must be the first unformatted record, beginning immediately after the header portion of the unformatted record. The complete federal return will be in unformatted record number two (2). If the federal return is very long, it might be necessary to use a third unformatted record. In that case, do not split a form between two unformatted records.

If there are no Idaho Forms 49, 49C, 49R, 56, 75, 75IMV and/or CG, the federal return will be in the first unformatted record, beginning immediately after the header portion of the unformatted record. The complete federal return must include the header portion of pages 1 and 2 for Forms 1040 and 1040A, and of page 1 Form 1040EZ.

Returns can be sent either in fixed-field format or in variable format. However, returns that are transmitted in fixed-field format must have all data in variable format structure within the unformatted records. That can be accomplished by placing all the variable format data inside a fixed-length record.

Only punctuation and symbols that are allowed in the federal return are allowed in the state portion of a return.

### FORM 49 IDAHO INVESTMENT TAX CREDIT (IF PRESENT IN THE RETURN)

FIELD NUMBER	FORM LINE	IDENTIFICATION	LENGTH	DESCRIPTION
0		n 1 in	26	ANI
0		Record ID	26	AN
(1)		Form ID Form Number	4	Value "ID" Value "ID40"
(2)		Form Number Form Occurrence	6	Value "ID49" Value "01"
(3) (4)		Page Number	2 5	Value "PG01"
(5)		Primary SSN	9	N Required Entry
055		Spouse SSN	9	N Required Entry
060		Name line 1	35	AN Required Entry
		A. Primary last name	32	AN
		B. Primary suffix	3	AN
065		Name line 2	35	AN
		A. Secondary last name	32	AN
		B. Secondary suffix	3	AN
070		Name line 3	35	AN
		A. Primary last name	16	AN
		B. Primary middle name	1	AN
		C. Secondary first name	16	AN
		D. Secondary middle name	1	AN
		E. Filler	1	Blank

FIELD NUMBER	FORM LINE	IDENTIFICATION I	LENGTH	DESCRIPTION
	PAI	RT I CURRENT YEAR'S CREDIT	AVAILABLE	
080	1	Amount of qualified investments acquired during the tax year	12	N
085	2	Credit earned. Multiply line 1 by 3%.	12	N
090	3	Pass-through share of credit from a partnership, S corporation, estate or tr	rust. 12	N
095	4	Credit received through unitary sharin	g. 12	N
100	5	Carryover from prior years investment credit.	12	N
105	6	Credit distributed to partners sharehol or beneficiaries.	ders 12	N
110	7	Credit shared with unitary affiliates.	12	N
115	8	Total credit available, subject to limita	tion. 12	N
		PART II LIMITATION	N	
120	1	Idaho income tax liability.	12	N
125	2	Credit for taxes paid to other states.	12	N
130	3	Subtract line 2 from line 1.	12	N
135	4	Investment tax credit from line 8, Par	t I. 12	N
140	5	Multiply line 3 by 45%.	12	N
145	6	Enter the smaller of line 4 or line 5.	12	N
150	7	Credit for contributions to education.	12	N
155	8	Total of nonrefundable credits available	e. 12	N

160	9a	If line 8 is greater than line 3, Subtract line 3 from line 8.	12	N
165	9b	Credit allowed.	12	N
170	10	If line 8 is equal to or less then line 3, enter the amount on line 6. This is the credit allowed.	12	N

### **IDAHO INVESTMENT TAX CREDIT**

1999

Name(s) as shown on return				
ART I CURRENT YEAR'S CREDIT AVAILABLE				
1. Amount of qualified investments acquired during the tax year. Attach a comp	let	e list	1	080
2. Credit earned. Multiply line 1 by 3%			2	085
<ol> <li>Credit Barned. Middley line 1 by 0 xx.</li> <li>Pass-through share of credit from a partnership, S corporation, estate or trust</li> </ol>		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	3	090
4. Credit received through unitary sharing. Attach a schedule		1	4	095
5. Carryover from prior years' investment credit. Attach Form 49C or other scher	dule		5	100
6. Credit distributed to partners, shareholders or beneficiaries		444444444444	6	105
7. Credit shared with unitary affiliates		***********	7	110
8. Total credit available subject to limitation. Add lines 2 through 5 and subtract			8	115
ART II LIMITATION		•		
	etu	m	. 1	120
1 Idaho income tax liability. Enter the amount from the appropriate income tax r	etu	m	· 1	120 125
ART II LIMITATION  1. Idaho income tax liability. Enter the amount from the appropriate income tax r  2. Credit for taxes paid to other states	• • • • •	************	· 2	
Idaho income tax liability. Enter the amount from the appropriate income tax r     Credit for taxes paid to other states	••••	************	· 2	125
Idaho income tax liability. Enter the amount from the appropriate income tax r     Credit for taxes paid to other states	4	*************	· 2	125
1. Idaho income tax liability. Enter the amount from the appropriate income tax r 2. Credit for taxes paid to other states	4	135	· 2	125
1. Idaho income tax liability. Enter the amount from the appropriate income tax r 2. Credit for taxes paid to other states	4 5 6	135 140 145	· 2	125
1. Idaho income tax liability. Enter the amount from the appropriate income tax r 2. Credit for taxes paid to other states	4 5 6 7	135 140 145 150	2 3	125
1. Idaho income tax liability. Enter the amount from the appropriate income tax r 2. Credit for taxes paid to other states	4 5 6 7	135 140 145 150	2 3	125 130 155
1. Idaho income tax liability. Enter the amount from the appropriate income tax r 2. Cradit for taxes paid to other states 3. Subtract line 2 from line 1. 4. Investment tax cradit from line 8, Part I 5. Multiply line 3 by 45%. 6. Enter the smaller of line 4 or line 5. 7. Cradit for contributions to educational entities 8. Total of nonrefundable cradits available. Add lines 6 and 7. 9. If line 8 is greater than line 3:  a. Subtract line 3 from line 8.	4 5 6 7	135 140 145 150	· 2 3	125 130
1. Idaho income tax liability. Enter the amount from the appropriate income tax r 2. Cradit for taxes paid to other states	4 5 6 7	135 140 145 150	· 2 3	125 130 155

#### QUALIFYING DEPRECIABLE PROPERTY

Idaho generally follows the definition of qualified property found in the Internal Revenue Code (IRC), Sections 46 and 48 as in effect prior to 1986. The property must have a useful life of three years or more and be property for which you are allowed the deduction for depreciation or amortization in lieu of depreciation. Qualifying property includes the following property used in a trade or business:

- Tangible personal property machinery and equipment
- Other tangible property property used as an integral part of manufacturing, production, extraction, or furnishing transportation, communications, or utility services, or research facilities and bulk storage facilities used in connection with those businesses
- Elevators and escalators
- Single purpose agricultural or horticultural structures
- Qualified timber property
- Petroleum storage facilities

#### **NONQUALIFYING PROPERTY**

#### Property that does not qualify includes:

- Buildings and their structural components
- · Property used in certain lodging facilities
- The cost of property expensed under Section 179, IRC
- Property subject to 60-month amortization
- Used property not acquired by purchase
- Property that is either nondepreciable or has a useful life of fewer than three years
- The portion of property used for personal use
- Used property in excess of \$150,000
- Horses

#### idaho exceptions to IRC Sections 46 and 48

Idaho law specifically excludes the following property from qualifying for the Idaho investment tax credit:

- Property not used in Idaho
- Vehicles under 8,000 pounds gross weight

### * FORM 49C SCHEDULE OF CREDIT CARRYOVERS

FIELD NUMBER	FORM LINE	IDENTIFICATION	LENGTH	DESCRIPTION
175	A-1	Credit earned	12	N
180	A-2	Allowed/used in 1992	12	N
185	A-3	Recaptured in 1992	12	N
190	A-4	Allowed/used in 1993	12	N
195	A-5	Recaptured in 1993	12	N
200	A-6	Allowed/used in 1994	12	N
205	A-7	Recaptured in 1994	12	N
210	A-8	Allowed/used in 1995	12	N
215	A-9	Recaptured in 1995	12	N
220	A-10	Allowed/used in 1996	12	N
225	A-11	Recaptured in 1996	12	N
230	A-12	Allowed/used in 1997	12	N
235	A-13	Recaptured in 1997	12	N
240	A-14	Allowed/used in 1998	12	N
245	A-18	Subtract the total of lines 2 through 16 from line 1.	12	N
250	B-1	Credit earned	12	N
255	B-4	Allowed /used in 1993	12	N
260	B-5	Recaptured in 1993	12	N
265	B-6	Allowed/used in 1994	12	N
270	B-7	Recaptured in 1994	12	N
275	B-8	Allowed in 1995	12	N
280	B-9	Recaptured in 1995	12	N
285	B-10	Allowed in 1996	12	N
				10

290	B-11	Recaptured in 1996	12	N
295	B-12	Allowed in 1997	12	N
300	B-13	Recaptured in 1997	12	N
305	B-14	Allowed/used in 1998	12	N
310	B-15	Recaptured in 1998	12	N
315	B-18	Subtract the total of lines 2 through 16 from line 1.	12	N
320	C-1	Credit earned	12	N
325	C-6	Allowed/used in 1994	12	N
330	C-7	Recaptured in 1994	12	N
335	C-8	Allowed/used in 1995	12	N
340	C-9	Recaptured in 1995	12	N
345	C-10	Allowed/used in 1996	12	N
350	C-11	Recaptured in 1996	12	N
355	C-12	Allowed/used in 1997	12	N
360	C-13	Recaptured in 1997	12	N
365	C-14	Allowed/used in 1998	12	N
370	C-15	Recaptured in 1998	12	N
375	C-16	Recaptured in 1999	12	N
380	C-18	Subtract the total of lines 2 through 16 from line 1.	12	N
385	D-1	Credit earned	12	N
390	D-8	Allowed/used in 1995	12	N
395	D-9	Recaptured in 1995	12	N
400	D-10	Allowed/used in 1996	12	N
405	D-11	Recaptured in 1996	12	N
410	D-12	Allowed/used in 1997	12	N

415	D-13	Recaptured in 1997	12	N
420	D-14	Allowed/used in 1998	12	N
425	D-15	Recaptured in 1998	12	N
430	D-16	Recaptured in 1999	12	N
435	D-18	Subtract the total of lines 2 through 16 from line 1.	12	N
440	E-1	Credit earned	12	N
445	E-10	Allowed/used in 1996	12	N
450	E-11	Recaptured in 1996	12	N
455	E-12	Allowed/used in 1997	12	N
460	E-13	Recaptured in 1997	12	N
465	E-14	Allowed/used in 1998	12	N
470	E-15	Recaptured in 1998	12	N
475	E-16	Recaptured in 1999	12	N
480	E-18	Subtract the total of lines 2 through 16 from line 1.	12	N
485	F-1	Credit earned	12	N
490	F-12	Allowed/used in 1997	12	N
495	F-13	Recaptured in 1997	12	N
500	F-14	Allowed/used in 1998	12	N
505	F-15	Recaptured in 1998	12	N
510	F-16	Recaptured in 1999	12	N
515	F-18	Subtract the total of lines 2 through 16 from line 1.	12	N
520	G-1	Credit earned	12	N
525	G-14	Allowed/used in 1998	12	N
530	G-15	Recaptured in 1998	12	N
535	G-16	Recaptured in 1999	12	N

540	G-18	Subtract the total of lines 2 through 16 from line 1.	12	N
545	G-19	Carryover to 1999	12	N

### **IDAHO INVESTMENT TAX CREDIT CARRYOVER**

1999

e(s) as ahown on return					S	Social Security Number or EIN	
	A 1992	B 1993	C 1994	D 1995	E 1996	F 1997	G 1998
. Credit earned	175	250	320	385	440	485	520
2. Allowed/used in 1992	180						
3. Recaptured in 1992	185						
4. Allowed/used in 1993	190	255					
5. Recaptured in 1993	195	260					
6. Allowed/used in 1994	200	265	325				
7. Recaptured in 1994	205	270	330				
8. Allowed/used in 1995	210	275	335	390			
9. Recaptured in 1995	215	280	340	395			
0. Allowed/used in 1996	220	285	345	400	445		
1. Recaptured in 1996	225	290	350	405	450		
2. Allowed/used in 1997	230	295	355	410	455	490	
3. Recaptured in 1997	235	300	360	415	460	495	
4. Allowed/used in 1998	240	305	365	420	465	500	525
5. Recaptured in 1998		310	370	425	470	505	530
6. Recaptured in 1999			375	430	475	510	535
7. In each column, add lines 2 through 16					·		
8. In each column, subtract line 17 from line 1	245	315	380	435	480	515	540
9. Carryover to 1999. Total co		" 40 0 . " F	D-+1 F 40				545

## FORM CG IDAHO CAPITAL GAINS DEDUCTION (IF PRESENT IN THE RETURN)

FIELD NUMBER	FORM LINE	IDENTIFICATION	LENGTH	DESCRIPTION
0 (1) (2) (3) (4) (5) 055 060 065		Record ID Form ID Form Number Form Occurrence Page Number Primary SSN Spouse SSN Name line 1 A. Primary last name B. Primary suffix Name line 2 A. Secondary last name B. Secondary suffix Name line 3 A. Primary last name B. Primary middle name C. Secondary first name D. Secondary middle name E. Filler	26 4 6 2 5 9 9 35 32 3 35 32 3 35 16 1 16	AN Value "ID" Value "IDCG Value "O1" Value "PG01" N Required Entry N AN Required Entry AN
	LINE	E 1. LIST QUALIFYING GAI	NS AND LOSSE	S
080	A	Description of property and Idlocation	laho 1 50	AN
085	В	Date acquired (mmddyyyy)	8	N
090	C	Date sold (mmddyyyy)	8	N
095	D	Sales Price	12	N
100	E	Cost or other basis	12	N
105	F	Gain or loss	12	N
110	A	Description of property and I location	daho 2 50	AN
115	В	Date acquired (mmddyyyy)	8	N
120	C	Date sold (mmddyyyy)	8	N

D	Sales Price	12	N
Е	Cost or other basis	12	N
F	Gain or loss	12	N
A	Description of property and Idaho location 3	50	AN
В	Date acquired (mmddyyyy)	8	N
C	Date sold (mmddyyyy)	8	N
D	Sales Price	12	N
E	Cost or other basis	12	N
F	Gain or loss	12	N
A	Description of property and Idaho location 4	50	AN
В	Date acquired (mmddyyyy)	8	N
C	Date sold (mmddyyyy)	8	N
D	Sales Price	12	N
E	Cost or other basis	12	N
F	Gain or loss	12	N
A	Description of property and Idaho location 5	50	AN
В	Date acquired (mmddyyyy)	8	N
C	Date sold (mmddyyyy)	8	N
D	Sales Price	12	N
Е	Cost or other basis	12	N
F	Gain or loss	12	N
A	Description of property and Idaho location 6	50	AN
В	Date acquired (mmddyyyy)	8	N
C	Date sold (mmddyyyy)	8	N
	E F A B C D E F A B C D E F A B C D E F A B C D E F A B C D E F A B C D E F A B C D E F A B C D E F A B C D E F A B C D E F A B C D E F A B C D E F A B C D E F A B C D E F A B C D E F A B C D E F A B C D E F A B C D E F A B C D E F A B C D E F A B C D E F A B C D E F A B C D E F A B C D E F A B B C D E F A B B C D E F A B B C D E F A B B C D E F A B B C D E F A B B C D E F A B B C D E F A B B C D E F A B B C D E F A B B C D E F A B B C D E F A B B C D E F A B B C D E F A B B B C D E F A B B B B B B B B B B B B B B B B B B	E Cost or other basis F Gain or loss A Description of property and Idaho location 3 B Date acquired (mmddyyyy) C Date sold (mmddyyyy) D Sales Price E Cost or other basis F Gain or loss A Description of property and Idaho location 4 B Date acquired (mmddyyyy) C Date sold (mmddyyyy) C Date sold (mmddyyyy) D Sales Price E Cost or other basis F Gain or loss A Description of property and Idaho location 5 B Date acquired (mmddyyyy) C Date sold (mmddyyyy) D Sales Price E Cost or other basis F Gain or loss A Description of property and Idaho location 6 B Date acquired (mmddyyyy)	E       Cost or other basis       12         F       Gain or loss       12         A       Description of property and Idaho location       50         B       Date acquired (mmddyyyy)       8         C       Date sold (mmddyyyy)       8         D       Sales Price       12         E       Cost or other basis       12         F       Gain or loss       12         A       Description of property and Idaho location       50         B       Date sold (mmddyyyy)       8         C       Date sold (mmddyyyy)       8         E       Cost or other basis       12         F       Gain or loss       12         A       Description of property and Idaho location       5         D       Sales Price       12         E       Cost or other basis       12         F       Gain or loss       12         E       Cost or other basis       12         F       Gain or loss       12         A       Description of property and Idaho location       6         F       Gain or loss       12         A       Description of property and Idaho location       6 <td< td=""></td<>

245	D	Sales Price	12	N
250	Е	Cost or other basis	12	N
255	F	Gain or loss	12	N
260	A	Description of property and Idaho location 7	50	AN
265	В	Date acquired (mmddyyyy)	8	N
270	C	Date sold (mmddyyyy)	8	N
275	D	Sales Price	12	N
280	Е	Cost or other basis	12	N
285	F	Gain or loss	12	N
290	A	Description of property and Idaho location 8	50	AN
295	В	Date acquired (mmddyyyy)	8	N
300	C	Date sold (mmddyyyy)	8	N
305	D	Sales Price	12	N
310	Е	Cost or other basis	12	N
315	F	Gain or loss	12	N
320	2	Qualifying capital gain from sale of personal residence	12	N
325	3	Qualifying capital gain or loss from installment sales	12	N
330	4	Qualifying capital gain or loss from sales of business property	12	N
335	5	Qualifying capital gain or loss from partnership, S corporations, estates or trusts.	12	N
340	6	Net gain or loss - Column F 1, 2 through 5.	12	N
345	7	Qualifying loss Carryover	12	N
350	8	Net gain or loss	12	N

355	9	If line 8 is a gain, multiply line 8 by $60\%$	12	N
360	10	Net capital gain included in income	12	N
365	11	Enter the smaller of line 9 or 10	12	N

CG CG

### **IDAHO CAPITAL GAINS DEDUCTION**

1999

(See instructions for qualifying Idaho property.)

TC00091			
8-04-99			Social Security Number
Name(s) as shown on return			1
		·	

a. Description of property and Idaho location	b. Date acquired (mo., day, yr.)	c. Date sold (mo., day, yr.)	d. Sales price	e. Cost or other basis	f. Gain or (loss)
080	085	090	095	100	105
110	115	120	125	130	135
140	145	150	155	160	165
170	175	180	185	190	195
200	205	210	215	220	225
230	235	240	245	250	255
260	265	270	275	280	285
290	295	300	305	310	315
Qualifying capital gain fr	om sale of person	al residence from	federal Schedule D	· · · · · · · · · · · · · · · · · · ·	2 320
Qualifying capital gain o					3 325
Qualifying capital gain o					4 330
Qualifying capital gain o					5 335
				· · · · · · · · · · · · · · · · · · ·	6 340
Add amounts in column f of line 1 and lines 2 through 5      Qualifying capital loss carryover. See instructions				7 345	
Net gain or (loss). Subtr					8 350
If line 8 is a gain, multip					9 355
Net capital gain included					10 360
. Net capital gain includet	7 113 HICOHIG 366 H	IGH MGUUIG,			365

## * FORM 56 IDAHO INDIVIDUAL NET OPERATING LOSS COMPUTATION (IF PRESENT IN THE RETURN)

FIELD NUMBER	FORM LINE	IDENTIFICATION	LENGTH	DESCRIPTION
0 (1) (2) (3) (4) (5) 055 060 065		Record ID Form ID Form Number Form Occurrence Page Number Primary SSN Spouse SSN Name line 1 A. Primary last name B. Primary suffix Name line 2 A. Secondary last name B. Secondary suffix Name line 3 A. Primary last name B. Primary middle name C. Secondary first name D. Secondary middle name E. Filler	26 4 6 2 5 9 9 35 32 3 35 32 3 35 16 1 16 1	AN Value "ID" Value "ID56 Value "O1" Value "PG01" N Required Entry N AN Required Entry AN
		PART 1 NET OPERATING	GLOSS	
080		Loss Year	4	N
085	1	Total Idaho adjusted income (loss) reported on the loss year return	12	N
090	2	Idaho net operating loss carryover	12	N
095	3	Capital losses in excess of capital gair	ns 12	N
100	4	Idaho capital gain deduction	12	N
105	5	Add lines 2, 3, and 4	12	N
110	6	Add lines 1 and 5	12	N
115	7	Casualty losses reported on federal Schedule A, Itemized Deductions	12	N
120	8	Net Operating loss deduction Subtract line 7 from line 6	12	N

125	9	Net Operating loss carryback (see form)	12	N
130	10	Enter the amount from line 7b Column C, Part 2	12	N
135	11	Net Operating loss carryover. Line 8, less line 9, plus line 10. Enter this amount on Line 1, Column A, Part 3	12	N
		PART II CARRYBACK		
140		Loss Year	4	N
145	A	3rd Preceding Tax Year Ending	4	N
150	1A	Net Operating Loss Carryback	12	N
155	2A	Idaho Adjusted Income	12	N
160	3A	Net Capital Loss Deduction	12	N
165	4A	Idaho Capital Gain Deduction	12	N
170	5A	Casualty Loss Reported of Sched A	12	N
175	6A	Modified Idaho Adjusted Income	12	N
180	7A	Net Operating Loss Available to another year	12	N
		If line 6 is equal to or more than 1, your net operating loss has been absorbed. Enter zero here.		
		If line 6 is less than line 1, your net operating loss has not been absorbed. Subtract line 6 from line 1 and enter the difference here. Also, enter the amounts from columns A and B on line 1 of the next column. Enter the amount from column C on line 10, Part I.		
185	В	2nd Preceding Tax Year Ending	4	N
190	1B	Net Operating Loss Carryback	12	N
195	2B	Idaho Adjusted Income	12	N

200	3B	Net Capital Loss Deduction	12	N
205	4B	Idaho Capital Gain Deduction	12	N
210	5B	Casualty Loss Reported of Sched A	12	N
215	6B	Modified Idaho Adjusted Income	12	N
220	7B	Net Operating Loss Available to another year	12	N
		If line 6 is equal to or more than 1, your net operating loss has been absorbed. Enter zero here.		
		If line 6 is less than line 1, your net operating loss has not been absorbed. Subtract line 6 from line 1 and enter the difference here. Also, enter the amounts from columns A and B on line 1 of the next column. Enter the amount from column C on line 10, Part I.		
225	C	1st Preceding Tax Year Ending	4	N
230	1C	Net Operating Loss Carryback	12	N
235	2C	Idaho Adjusted Income	12	N
240	3C	Net Capital Loss Deduction	12	N
245	4C	Idaho Capital Gain Deduction	12	N
250	5C	Casualty Loss Reported of Sched A	12	N
255	6C	Modified Idaho Adjusted Income	12	N
260	7C	Net Operating Loss Available to another year	12	N
		If line 6 is equal to or more than 1, your net operating loss has been absorbed. Enter zero here.		

If line 6 is less than line 1, your net operating loss has not been absorbed. Subtract line 6 from line 1 and enter the difference here. Also, enter the amounts from columns A and B on line 1 of the next column. Enter the amount from column C on line 10, Part I.

#### PART III CARRYOVER

265		Loss Year	4	N
270	A	1st Succeeding Tax Year Ending	4	N
275	1A	Net Operating Loss Carryover	12	N
280	2A	Idaho Adjusted Income	12	N
285	3A	Net Capital Loss Deduction	12	N
290	4A	Idaho Capital Gain Deduction	12	N
295	5A	Casualty Loss Reported of Sched A	12	N
300	6A	Modified Idaho Adjusted Income	12	N
305	7A	Net Operating Loss Available to another year	12	N
		If line 6 is equal to or more than 1, your net operating loss has been absorbed. Enter zero here.		
		If line 6 is less than line 1, your net operating loss has not been absorbed. Subtract line 6 from line 1 and enter the difference here. Also, enter this amount on line 1 of the next column and apply the loss to the next available year.		
310	В	2nd Succeeding Tax Year Ending	4	N
315	1B	Net Operating Loss Carryover	12	N
320	2B	Idaho Adjusted Income	12	N
325	3B	Net Capital Loss Deduction	12	N
330	4B	Idaho Capital Gain Deduction	12	N

335	5B	Casualty Loss Reported of Sched A	12	N
340	6B	Modified Idaho Adjusted Income	12	N
345	7B	Net Operating Loss Available to another year	12	N
		If line 6 is equal to or more than 1, your net operating loss has been absorbed. Enter zero here.		
		If line 6 is less than line 1, your net operating loss has not been absorbed. Subtract line 6 from line 1 and enter the difference here. Also, enter this amount on line 1 of the next column and apply the loss to the next available year.		
350	C	3rd Succeeding Tax Year Ending	4	N
355	1C	Net Operating Loss Carryover	12	N
360	2C	Idaho Adjusted Income	12	N
365	3C	Net Capital Loss Deduction	12	N
370	4C	Idaho Capital Gain Deduction	12	N
375	5C	Casualty Loss Reported of Sched A	12	N
380	6C	Modified Idaho Adjusted Income	12	N
385	7C	Net Operating Loss Available to another year	12	N
		If line 6 is equal to or more than 1, your net operating loss has been absorbed. Enter zero here.		
		If line 6 is less than line 1, your net operating loss has not been absorbed. Subtract line 6 from line 1 and enter the difference here. Also, enter this amount on line 1 of the next column and apply the loss to the next available year.		

56 R 1A00561

#### IDAHO INDIVIDUAL NET OPERATING LOSS COMPUTATION

M 7-01-99 Name	Social Security Number
PART I - Use this part to compute your net operating loss. Loss Yes	
Total Idaho adjusted income (loss) reported on the loss year return.	m 1 085
2. Idaho net operating loss carryover	2 090
3. Capital losses in excess of capital gains	3 095
4. Idaho capital gain deduction	4 100
5. Add lines 2, 3 and 4	5 105
6. Add lines 1 and 5	6 110
7. Casualty losses reported on federal Schedule A, Itemized Dedu	tions 7 115
8. Net operating loss deduction. Subtract line 7 from line 6	
<ol><li>Net operating loss carryback. Enter the amount from line 8 t you elected to forego the carryback, enter -0- here and on line</li></ol>	
O. Enter the amount from line 7b, column c, Part II. This is the net absorbed in the carryback years	operating loss carryback not
<ol> <li>Net operating loss carryover. Line 8, less line 9, plus line 10. I column a, Part III.</li> </ol>	

#### **INSTRUCTIONS FOR PART I**

Use Part I to compute your net operating loss. Enter the loss year on the line.

Line 1. Enter Idaho adjusted income (loss).

• Form 40 filers: line 29 - 1996, 1997, 1998, 1999

• Form 43 filers: line 46, Column B - 1996

line 44, Column B - 1997, 1998, 1999

Line 2. Enter any operating loss carryover from prior years if included in the amount on line 1.

Line 3. Enter any capital losses in excess of capital gains included in the amount on line 1. For example, a taxpayer reported a \$4,000 capital gain and a \$5,000 capital loss on federal Schedule D. \$1,000 is the amount of capital loss deduction included in Idaho adjusted income (loss).

Line 4. Enter any Idaho capital gain deduction allowed in computing Idaho adjusted income (loss).

Line 5. Add lines 2, 3 and 4 and enter the total on this line.

Line 6. Add lines 1 and 5. A loss on line 1 will be reduced by the amount on line 5. For example, a taxpayer's Idaho adjusted income (loss) is (\$10,000). The taxpayer claimed an Idaho capital gain deduction of \$1,500 (\$1,500 is entered on lines 4 and 5). The taxpayer enters (\$8,500) on line 6.

A loss on line 1 could be eliminated by an amount on line 5. For example, a taxpayer's idaho adjusted income (loss) is (\$10,000). The taxpayer claimed an idaho net operating loss carryover of

\$20,000 (\$20,000 is entered on lines 2 and 5). The taxpayer enters \$10,000 on line 6. When the total of lines 1 and 5 on line 6 is a positive amount, no net operating loss exists unless the casualty loss on line 7 creates the loss.

Line 7. Enter any casualty losses reported on federal Schedule A, Itemized Deductions, provided that the property is physically located in Idaho at the time of the casualty. Use federal Form 4684, Section A, to compute the casualty loss(es) deductible on Schedule A.

Form 43 filers will multiply the Idaho percentage from the loss year return by the amount of casualty loss reported on the federal Schedule A for that year to determine the amount to enter on this line. Enter the amount.

Line 8. Idaho net operating loss deduction. Subtract line 7 from line 6. A loss on line 6 will be increased by an amount on line 7. For example, a taxpayer's Idaho adjusted income (loss) is (\$10,000) and he also reports a \$1,500 casualty loss on Schedule A. His net operating loss deduction is (\$11,500). This is the net operating loss deduction that is available for carryback or carryover. Use Part II to determine carryback applications and Part III to determine carryover applications.

Line 9. This is the net operating loss carryback to enter on line 1, column a, Part II. Do not enter more than \$100,000. Complete Part II before entering any amounts on lines 10 and 11.

Line 10. If the net operating loss carryback is not completely absorbed, enter the unabsorbed amount.

Line 11. If you elect to forego the net operating loss carryback, enter the amount from line 8.

**∜**..'

### APPLICATION OF IDAHO INDIVIDUAL NET OPERATING LOSSES

Nemi	· · · · · · · · · · · · · · · · · · ·	Social Security Number		
PART II - CARRYBACK Use this part to apply the net operating k	oss to carryback year	e). Loss Year 140		
Complete one column before going to the next column.	a. 3rd preceding tax year ended 19_145	b. 2nd preceding tax year ended 19_185	c. 1st preceding tax year ended 19 <u>225</u>	
Net operating loss carryback. In column a, enter as a positive number the net operating loss from Part I, line 9. In columns b and c, enter amounts from line 7 below, columns a and b respectively	150	190	230	
2. Idaho adjusted income from the tax return (or as previously adjusted) before NOL carryback. If a loss, enter the amount as a negative number	155	195	235	
3. Net capital loss deduction claimed on the carryback year return. See federal Schedule D. Enter as a positive number.	160	200	240	
4. Idaho capital gain deduction claimed on the carryback year return. Enter as a positive number. See Idaho Form CG	165	205	245	
5. Casualty loss reported on Schedule A, Itamized Deductions, and claimed on the carryback year return. Enter as a positive number	170	210	250	
Modified Ideho adjusted income. Add lines 2, 3, and 4 and subtract line 5. If the total on this line is zero or less, enter -0	175	. 215	255	
7.Net operating loss available for application to another year:				
<ul> <li>If line 6 is equal to or more than line 1, your net operating loss has been absorbed. Enter zero here.</li> </ul>				
b. If line 6 is less than line 1, your net operating loss has not been absorbed. Subtract line 6 from line 1 and enter the difference here. Also, enter the amounts from columns a and b on line 1 of the next column. Enter the amount from column c on line 10, Part I.	180	220	260	

PART IN - CARRYOVER Use this part to apply the net operating loss to carryover year(s). Loss Year 265			
Complete one column before going to the next column	a. 1st succeeding tax year ended 19_270	b. 2nd succeeding tax year ended 19_310	c. 3rd succeeding tax year ended 19 <u>350</u>
Net operating loss carryover. In column a, enter as a positive number the net operating loss from Part I, line 11. In columns b and c, enter amounts from line 7 below, columns a and b respectively	275	315	355
<ol><li>Idaho adjusted income from the tax return before the NOL carryover. If a loss, enter the amount as a negative number.</li></ol>	280	320	360
3. Net capital loss deduction claimed on the carryover year return. See federal Schedule D. Enter as a positive number.	285	325	365
4. Idaho capital gain deduction claimed on the carryover year return. Enter as a positive number. See Idaho Form CG	290	330	370
5. Casualty loss reported on Schedule A, Itemized Deductions, and claimed on the carryover year return. Enter as a positive number.	295	335	375
6. Modified Ideho adjusted income. Add lines 2, 3, and 4 and subtract line 5. If the total on this line is zero or less, enter	300	340	380
7. Net operating loss available to apply to another year:			
a. If line 6 is equal to or more than line 1, your net operating loss has been absorbed. Enter zero here.			
b. If line 6 is less than line 1, your net operating loss has not been absorbed. Subtract line 6 from line 1 and enter the difference here. Also, enter this emount on line 1 of the next column and apply the loss to the next available year.	305	345	385

## * FORM 49R RECAPTURE OF IDAHO INVESTMENT TAX CREDIT (IF PRESENT IN THE RETURN)

(IF PRESENT IN THE RETURN)					
FIELD NUMBER	FORM LINE	IDENTIFICATION	LENGTH	DESCRIPTION	
0 (1) (2) (3) (4) (5) 055 060 065		Record ID Form ID Form Number Form Occurrence Page Number Primary SSN Spouse SSN Name line 1 A. Primary last name B. Primary suffix Name line 2 A. Secondary last name B. Secondary suffix Name line 3 A. Primary last name B. Primary middle name C. Secondary first name D. Secondary middle name E. Filler	26 4 6 2 5 9 9 35 32 3 35 32 3 35 16 1 16 1	AN Value "ID" Value "ID49R" Value "01" Value "PG01" N Required Entry N AN Required Entry AN	
FIELD NUMBER	FORM LINE	IDENTIFICATION	LENGTH	DESCRIPTION	
		PART 1 PROPERT	Y ITC		
080	A	Property Description	50	AN	
085	В	Property Description	50	AN	
090	C	Property Description	50	AN	
095	D	Property Description	50	AN	

100

Ε

Property Description

50

AN

### PART 2 ORIGINAL ITC

10	5 1-1		Date property was placed in service (Format MMDDYYYY)	8	N
11	0 2-4	A	Cost or other basis	12	N
11	5 3-4	A	Credit percentage 3%	12	N
12	0 4-4	A	Original credit. Line 2 X line 3	12	N
12	5 5-2	A	Date property ceased to qualify	8	N
13	0 6-4		Number of full years between the date on line 1 and the date on line 5	2	N
13	5 7-1	A	Percentage from Table	12	N
14	0 8-4		Tentative recapture tax Line 4 X Line 7	12	N
14	5 1-1		Date property was placed in service (Format MMDDYYYY)	8	N
15	0 2-1	В	Cost or other basis	12	N
15	5 3-]	В	Credit percentage 3%	12	N
16	0 4-1	В	Original credit. Line 2 X line 3	12	N
16	5 5-1	В	Date property ceased to qualify	8	N
17	6-1		Number of full years between the date on line 1 and the date on line 5	2	N
17	7-1	В	Percentage from Table	12	N
18	0 8-3		Tentative recapture tax Line 4 X Line 7	12	N
18	5 1-0		Date property was placed in service (Format MMDDYYYY)	8	N
19	0 2-0	C	Cost or other basis	12	N
19	5 3-0	C	Credit percentage 3%	12	N
20	0 4-0	C	Original credit. Line 2 X line 3	12	N
20	5 5-0	C	Date property ceased to qualify	8	N

210	6-C	Number of full years between the date on line 1 and the date on line 5	2	N
215	7-C	Percentage from Table	12	N
220	8-C	Tentative recapture tax Line 4 X Line 7	12	N
225	1-D	Date property was placed in service (Format MMDDYYYY)	8	N
230	2-D	Cost or other basis	12	N
235	3-D	Credit percentage 3%	12	N
240	4-D	Original credit. Line 2 X line 3	12	N
245	5-D	Date property ceased to qualify	8	N
250	6-D	Number of full years between the date on line 1 and the date on line 5	2	N
255	7-D	Percentage from Table	12	N
260	8-D	Tentative recapture tax Line 4 X Line 7	12	N
265	1-E	Date property was placed in service (Format MMDDYYYY)	8	N
270	2-E	Cost or other basis	12	N
275	3-E	Credit percentage 3%	12	N
280	4-E	Original credit. Line 2 X line 3	12	N
285	5-E	Date property ceased to qualify	8	N
290	6-E	Number of full years between the date on Line 1 and the date on Line 5	2	N
295	7-E	Percentage from Table	12	N
300	8-E	Tentative recapture tax Line 4 X Line 7	12	N
305	9	Add line 8, Column A through E	12	N
310	10	Pass through of credit	12	N
315	11	Add Lines 9 and 10	12	N

320 12	Enter credit from Line 4 (see form)	12	N
325 13	Recapture of investment tax credit. Enter on Line 51, Form 40 or on Line 66 Form 43	12	N

# F 49R RECAPTURE OF IDAHO INVESTMENT TAX CREDIT M 624-99

For the year January 1 - Decemb	oer 31,, or 1	iscal year beginn	ing	, ending		
Name(s) as shown on return				Social Security Number of	or EIN	
PART I IDENTIFY PROPERTY	Y THAT CEASED TO (	QUALIFY AS ID	AHO INVESTMEN	NT TAX CREDIT	PROPERTY	
Properties		Property	Description			
Α	080					
В	085					
С	090					
D	095			4		
E	100					
PART II ORIGINAL IDAHO IN	IVESTMENT TAX CRE	DIT				
			Properties			
	A	В	С	D	E	
Date property was placed in service	105	145	185	225	265	
2. Cost or other basis	110	150	190	230	270	
3. Credit percentage	115 3%	155 3%	195 <b>3</b> %	235 3%	275 <b>3%</b>	
4. Original credit. Line 2 times line 3	120	160	200	240	280	
5. Date property ceased to qualify	125	165	205	245	285	
6. Number of full years between the date on line 1 and the date on line 5	130	170	210	250	290	
PART III COMPUTATION OF	RECAPTURE TAX					
7. Recapture percentage from table, page 2	135	175	215	255	295	
8. Tentative recapture tax. Line 4 times line 7	140	180	220	260	300	
9. Add line 8, columns A throug					305	
10. Pass-through of credit recapt					310	
11. Add lines 9 and 10					315	
12. Enter the portion of original of	redit on line 4 not used	to offset tax in ar	ny year. Do not en	ter more	320	
then line 11. Any unused cre 13. Recepture of investment tax line of your tax return. Do no computed on Form 49.	credit. Subtract line 12	from line 11. En	ter here and on the	proper	325	

## * FORM 75 IDAHO FUELS USE REPORT (IF PRESENT IN THE RETURN)

FIELD NUMBER	FORM LINE	IDENTIFICATION	LEN	GTH	DESCRI	IPTION
0 (1) (2) (3) (4) (5) 055 060 065		Record ID Form ID Form Number Form Occurrence Page Number Primary SSN Spouse SSN Name line 1 A. Primary last name B. Primary suffix Name line 2 A. Secondary last name B. Secondary suffix Name line 3 A. Primary last name B. Primary middle name C. Secondary first name D. Secondary middle name E. Filler	26 4 6 2 5 9 35 32 3 35 16 1 1		N	D75" 1"
FIELD NUMBER	FORM LINE	IDENTIFICATION	LEN	GTH	DESCRI	IPTION
080		Federal Employer Identification N	1	9		N
		- ·				
085		Period Beginning (format MMDD)		8		N
090		Period Ending (format MMDDYY	YY)	8		N
095	1	Refrigeration Unit Indicator		1 Values:	0 for No 1 for Yes	N
100	2	IFTA Off Load Indicator		NO EN	TRY	
105	3	Intrastate Off Highway Indicator		1 Values:	0 for No 1 for Yes	N

110	4	Intrastate Off Load Indicator	1 Values: 0 for No	N
115	5	Government Vehicle Indicator	1 for Yes  1 Values: 0 for No 1 for Yes	N
120	6	Unlicensed Equipment Diesel Indicator	1 Values: 0 for No 1 for Yes	N
125	7	Other Diesel Indicator	1 Values: 0 for No 1 for Yes	N
130	8	Stationary Engines Indicator	1 Values: 0 for No 1 for Yes	N
135	9	Aircraft Indicator	1 Values: 0 for No 1 for Yes	N
140	10	Unlicensed Equipment Gas Indicator	1 Values: 0 for No 1 for Yes	N
145	11	Other Gas Indicator	1 Values: 0 for No 1 for Yes	N
150	12	Transfer Fee Indicator	NO ENTRY	
155		Unlicensed/Other Gas Description	50	AN
160		Unlicensed/Other Diesel Description	50	AN
165	1-A	Nontaxable Gallons Gas	12	N
170	1-B	Nontaxable Gallons Av Gas	12	N
175	1-C	Nontaxable Gallons Jet	12	N
180	1-D	Nontaxable Gallons Undyed Diesel	12	N
185	1-E	Nontaxable Gallons Propane	12	N
190	1-F	Nontaxable Gallons Natural Gas	12	N
195				
1,0	3-A	Tax Refund Gas	12	N

205	3-C	Tax Refund Jet	12	N
210	3-D	Tax Refund Undyed Diesel	12	N
215	3-E	Tax Refund Propane	12	N
220	3-F	Tax Refund Natural Gas	12	N
225	4-A	Gasoline Tax Refund Enter on Line 60A Form 40 Enter on Line 74A Form 43	12	N
230	5-A	Special Fuels Tax Refund Enter on Line 60B Form 40 Enter on Line 74B Form 43	12	N
235	6-A	Taxable Gallons Gas	12	N
240	6-B	Taxable Gallons Av Gas	12	N
245	6-C	Taxable Gallons Jet	12	N
250	6-D	Taxable Gallons Undyed Diesel	12	N
255	6-E	Taxable Gallons Propane	12	N
260	6-F	Taxable Gallons Natural Gas	12	N
265	8-A	Tax Due Gas	12	N
270	8-B	Tax Due Av Gas	12	N
275	8-C	Tax Due Jet	12	N
280	8-D	Tax Due Undyed Diesel	12	N
285	8-E	Tax Due Propane	12	N
290	8-F	Tax Due Natural Gas	12	N
295	9-A	Transfer Fee	NO ENTRY	
300	10-A	Gasoline Tax Due	12	N
305	11-A	Special Fuels Tax Due Enter Total of Gasoline Tax Due and Special Fuels Tax Due, on Line 49 Form 40, or Line 64 Form 43	12	N
310	12	Refund	NO ENTRY	
315	13	Tax Due	NO ENTRY	

## F 75

## **IDAHO FUELS USE REPORT**

M 9-3-98			,	<del></del>	- 1							1	
		E.C.	R.C.	Name Contro	at							. M	W
	Name		<u> </u>				DBA				***************************************	1	
PLEASE									Social Secu	urity Number			
PRINT	Address								•				
OR TYPE	City, State and Zip Code	,							Federal Em	ployer identifi		nber	
1176	·			····					•	08	0		
Section I.	FILING PERIOD b ready claimed a ref	eginning	g	085	, 19,	and	ending •	090		19 : form.			÷
If you have all Section II.	ready claimed a rej Mark the box(e:	una oj m s) belov	w that l	nest desc	ribe(s) vo	our ne	ontaxable u	use(s) to	claim	a refund	of fue	els taxes	
	ESEL used in	<u> </u>					X-PAID GAS		ed in				
1. • Ref	rigeration unit wit	th sepai	rate tank	095			• 🗌 Statio	nary eng	ines 13	-			
2. · IFT/	off-loading allow	vance (ı	attach Fo	orm 75-IC)	100			ift (see in					. 446
	astate motor vehic		highway	miles 10	5			ensed equ (describ		( <b>you mu</b> s	st list ty	/pe below	/) 140
(att	ach Form 75-IMV astate motor vehic	) Nas off.	loedina s	llowance	110		• _ Other	155	s ugww,	,			
	ach Form 75-IMV		louding u										
5. • Fed	eral, state, and lo	cal gov	ernment	motor veh	icles 115	* Ar	v GASOLINI	E used in	a licens	ed motor	vehicle	(governn	nent
	icensed equipme			type belo	w) 120	or p	ivately owner	ed) does	not quali	ify for a r	efund o	f the gas	oline
7. • Oth	er (describe belo	W) 123				tax.	NSFER FEE						
			160			12.		fied Cons	umer (a	ttach For	m 75-0	lC)	
						<del></del>		1	)	E	Т	F	
Section III.	REFUND	į	A Gaso		B Av Gas		C Jet Fuei		l Diesel	Propa	ine	Nat G	18
1. Nontaxab	le galions lions)	•[	16	55	170		175	1 1	80	18		190	
			.25	5	.055		.045	.2	25	.18	1	.19	7
3. Tax refund	ł		106		200		205	2	10	21	5	22	°
4. Gasoline	tax refund. Add lin	ne 3,	22	5									
5. Special fu	els tax refund. Au umns D, E & F	dd	23	0									
Section IV.			A Gaso	1	B Av Gas		C Jet Fuel	1	) esel	Prop	1	F Nat Ga	18
6. Taxable g	allons allons)	•	23	55	240		245	2	50	25	5	260	)
_			.2		.055		.045	.:	25	.18	1	.19	7
		'	26	5	270		275	2	80	28	5	290	)
	ee												
10. Gasoline	tax due. Add line A, B & C	8,	300	0									
11. Special f	uels tax due. Add D, E & F & line 9.	line 8,	30	5									
DO NO	T complete lines	12 and	13 if atte	aching For	m 75 to y	our Id	aho income	Tax Retu	rn.		ı		
12. Refund.	If the total of line	s 4 and	l 5 is larg	er than th	e total of li	ines 1	O and 11, er	nter the c	lifferenc				_L_
	. If the total of lin												
	alties of perjury, I	declare	that to t	he best of	my know	ledge   Paid	and belief ti	his repor	is true,	correct a	Preparer's	nplete. s EIN or SSN	
SIGN .	monsea ailuarnia												
HERE TH	6				Daytime phone	Add	ress and phone nur	mber					
1													

## * FORM 75-IMV IDAHO FUELS TAX REFUND WORKSHEET (IF PRESENT IN THE RETURN)

(3)       Form Occurrence       2       Value "0         (4)       Page Number       5       Value "F         (5)       Primary SSN       9       N Requir         055       Spouse SSN       9       N         060       Name line 1       35       AN Requir         A. Primary last name       32       AN         B. Primary suffix       3       AN         A. Secondary last name       32       AN         B. Secondary suffix       3       AN         Name line 3       35       AN         A. Primary last name       16       AN         B. Primary middle name       1       AN         C. Secondary first name       16       AN	D75IMV" )1"
D. Secondary middle name 1 AN E. Filler 1 Blank	
FIELD FORM IDENTIFICATION LENGTH DESCRINUMBER LINE	IPTION
DBA (If different than Taxpayer Name) 35	AN
085 Federal Employer Identification Number 9	N
090 Diesel Tax Type Indicator 1 Values: 0 for No 1 for Yes	N
Propane Tax Type Indicator  1 Values: 0 for No 1 for Yes	N
Natural Gas Tax Type Indicator  1 Values: 0 for No	N
1 for Yes 105 1 Total Miles 12	N
Total Fuel Consumed 12	N

115	3	Fuel Used In Offloading Allowance	12	N
120	4	Net Gallons Consumed	12	N
125	5-C	Calculated MPG	12	N
130	5-S	Standard or Statutory MGP	12	N
135	6-C	Total Taxable Miles (Calculated)	12	N
140	6-S	Total Taxable Miles (Standard)	12	N
145	7-C	Total Gallons Used on Taxable Roads	12	N
150	7-S	Total Gallons Used on Taxable Roads	12	N
155	8-C	Tax Paid Gallons (Calculated)	12	N
160	8-S	Tax Paid Gallons (Standard)	12	N
165	9-C	Nontaxable Gallons (Calculated)	12	N
170	9-S	Nontaxable Gallons (Standard)	12	N
175	1	Units Used in Offloading	12	N
180	2	Credit Allowed per Unit	12	N
185	3	Gallons in Fuel Supply Tank	12	N
190	1	Gallons in Fuel Supply Tank	12	N
195	2	Offloading Percentage	12	N
200	3	Gallons Used in Offloading	12	N

### **IDAHO FUELS TAX REFUND WORKSHEET**

#### INTRASTATE MOTOR VEHICLES

Name / DBA 080	SSN / EIN 085
You may use this worksheet to calculate your	FUEL TAX TYPE (check one):
refund of the special fuels tax if you use special fuels in:	☐ DIESEL 090 ☐ PROPANE 095
Motor vehicles on nontaxable roads     A motor vehicle's nower-take-off unit	NATURAL GAS 100

	CALCULATED MPG	STANDARD OR STATUTORY MPG
1. Total miles	105	
2. Total Fuel Consumed	110	
3. Less: Fuel Used In Off-loading Allowance (see below)	115	
4. Net Gallons Consumed	120	
5. Calculated, Standard or Statutory MPG	125	130
6. Total Taxable Miles	135	140
7. Total Gallons of Fuel Used on Taxable Roads	145	150
8. Tax Paid Gallons	155	160
9. Nontaxable Gallons	165	170

### INTRASTATE MOTOR VEHICLE OFF-LOADING ALLOWANCE CALCULATION

175

2	Credit allowed per unit (See Idaho Motor Fuels Tax Rules) Gallons used in off-loading process (Multiply line 1 by line 2) (Carry to line 3 of Idaho Fuels Tax Refund Worksheet, Form 75-IN	180 /IV)	185
OR			
	Number of gallons placed into the fuel supply tank (from line 2 of the Idaho Fuels Tax Refund Worksheet)	190	_
2. 3.	Tax Commission approved off-loading percentage	195 //V)	200

^{*}Units may include hours, gallons, tons, or yards as specified in the Idaho Motor Fuels Tax Rules for each allowance. Use separate worksheet for each process that has a different unit of measure.